

CHEMIST & DRUGGIST

The newswweekly for pharmacy

a Benn publication

January 10 1981

New POM and
GSL Orders
published

UK pharmacy:
not worth the
investment?

Braun say
'That's Life'

Addition to
Sangers
Agencies

Clinical
pharmacy
part 4

Interlab helps keep Britain healthy all through the winter



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CHEMIST & DRUGGIST

Incorporating Retail Chemist

January 10 1981

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COMMENT

Tax avoidance

History has a habit of repeating itself, it is said, but just how true that is of the prescription charge debate was made known only last week when Cabinet papers for 1950 became available for public inspection after the expiry of the statutory period of 30 years.

Even so short a time after the inception of the National Health Service there was concern that the drugs bill should be cut, but the Cabinet papers show what a determined fight the architect of the NHS, Mr Aneurin Bevan, put up to prevent the introduction of charges. Mr Bevan favoured action aimed at stopping over-prescribing, but found that then, as now, there seemed to be no way to devise proposals which did not interfere with the clinical freedom of the doctor. As a result, this approach was abandoned.

Supporters of the basic principles of the NHS will argue that the failure of the visionary to win on the issue has been to the detriment of the service over the past three decades. Certainly the pharmaceutical profession has witnessed at first hand the problems that both prescription charges and over-prescribing (not always the medical profession's fault, it must be said in their defence) have caused to the patient—and the taxpayer.

Mr Bevan told Parliament that he "shuddered to think of the ceaseless cascade of medicine pouring down British throats". Some 200 million prescriptions were being issued in 1950—an average of five per head of the population, leading Mr Bevan to write in a memorandum: "Here there ought to be scope for savings if ways and means can be found. While flagrant abuse may be the exception, it is obvious that there is more

prescribing than can really be necessary."

Since 1950, of course, the medical profession has had to accept clipping of its clinical wings—"hard" drugs, amphetamines, barbiturates, for example—but only after public disquiet about the doctors' ability to exercise full collective self-control. In many of these cases it has been the pharmacist who provided the local evidence that forced the national issue, and it has also been from the pharmaceutical profession that potential answers to Mr Bevan's "ways and means" search—such as triple prescription forms—have originated. What a pity solutions of this kind could not have been considered 30 years ago: a great deal of the "political football" element in the NHS might then have been avoided.

Ironically, it was a Labour Government which introduced legislation providing powers to levy prescription charges. It took a Conservative Government to make first use of the opportunity, but both political persuasions have since been willing to reap a tax harvest. How far removed this attitude is from the ideals of Aneurin Bevan that the service should be free at the time of need. ■

Supervision change in new medicines legislation

The requirement for pharmacist supervision of sales of larger packs of analgesics is removed under new legislation due to be published on January 9, operative January 30.

The Medicines (General Sale List) Order 1980 (SI1980: 1922; HMSO price £4.70) gives effect to changes outlined in consultation letter MLX 126 (C&D, June 7, 1980, p960). Under the 1977 Order, which is now revoked, the pharmacist was required to supervise large-pack sales even though two smaller packs of equivalent quantity could be sold without supervision or from supermarkets.

The restriction on pack sizes in which such medicines may be sold at non-pharmacy premises are now to be found in the Medicines (Sale or Supply) (Miscellaneous Provisions) Regulations 1980 (SI1980: 1923; HMSO price £1.40).

Proposals modified

The proposals outlined in MLX 126 have been modified in two respects. First, medicines sold through automatic machines are now subject to no special pack size restrictions (only those restrictions which apply to sales over the counter apply.) Second, implementation of the proposal to exclude from the General Sale List cosmetic medicinal eye drops has been postponed for one year to enable stocks to be cleared.

The Medicines (Prescription Only) Order 1980 (SI1980: 1921; HMSO price £4.50) and the Medicines (Pharmacy and General Sale—Exemption) Order 1980 (SI1980: 1924, price £2.10) give effect to changes forecast in MLX 115 issued in May 1979, MLX 118 (supply of medicines aboard aircraft) issued in October 1979 and MLX 129 (parenteral administration by unorthodox practitioners) issued in October 1980.

The proposals outlined in MLX 115 have, however, been modified in the following respects:—

(i) The proposal to redefine MD and MDD to make it clear that they relate only to dosages recommended for adults has been abandoned, and so has

the proposal to allow phenobarbitone-containing asthma remedies to be sold without prescription in an emergency.

(ii) Products containing a histamine H1 receptor blocker and indicated for use in pregnancy will be made POM by listing them by name in Part III of Schedule 1 to the POM Order, and not by creating a new class of POM.

(iii) There is to be no restriction on the amount of local anaesthetic that state registered chiropodists with a certificate of competence in the use of analgesics are allowed to administer by injection in any period of twenty-four hours.

Emergency only

(iv) The proposal to permit registered ophthalmic opticians to sell or supply certain ophthalmic pharmacy medicines in the course of their professional practice, not only in an emergency, has not been implemented.

The Medicines (Pharmacy and General Sales—Exemption) Order (published last week ahead of the other SIs) extends to two years from date of a grant of a product licence, the temporary exemption which allows general sale of a product before it has been formally included in the General Sale List.

6c dilutions

Certain homoeopathic dilutions are currently exempted from Section 52 (pharmacy only) of the Act when listed in a schedule to the equivalent 1977 Exemption Order; the 1980 Order allows in addition complete exemption for "any substance where the unit preparation has been diluted to at least one part in a million million (6c)."

Exemptions from Section 52 and 53 (general sale requirements) for state registered chiropodists have been extended to include the following preparations:—Cream, powder or solution containing not more than 1.0 per cent clotrimazole; ointment containing not more than 3.0 per cent chlorquinaldol; solution containing

not more than 10.0 per cent glutaraldehyde; ointment containing hyaluronidase and a heparinoid; cream containing not more than 2.0 per cent mepyramine maleate; cream or powder containing not more than 2.0 per cent miconazole nitrate; cream, jelly or powder containing not more than 10.0 per cent polynoxylin; salicylic acid lotion BPC and cream or tincture containing not more than 0.1 per cent thiomersal. (Sale or supply must be in the course of professional practice.)

The exemption for registered ophthalmic opticians has been clarified to ensure that the sale or supply of permitted substances and preparations may be only in an *emergency* in the course of professional practice.

Aircraft exemption

Exemptions from Section 52 are granted to the operator or commander of an aircraft so that supply may be made for the immediate treatment of sick or injured persons on an aircraft. (Prescription only medicines must have been ordered in writing by a doctor and must be supplied in accordance with a doctor's written instructions as to the circumstances in which they are to be used.)

Another new exemption allows licence holders to supply all medicinal products to a pharmacist for the purpose of compiling a tablet and capsule identification guide or similar publication. ■

Sally Hansen join Sangers Agencies

Sangers Agencies have taken over the exclusive selling and merchandising of Sally Hansen products to chemists, department stores and "other traditional outlets", effective as from last Monday.

The range was launched in the UK in 1973 and was previously handled by Smith & Nephew under joint venture arrangements with the US parent company, Del Corporation. Smith & Nephew recently disposed of their other cosmetic interest—Quant, Miners and Outdoor Girl—to Max Factor and Del are now the sole owner of the Hansen range.

The American corporation say that Sangers Agencies were chosen to handle the products because of their experience in dealing with chemists. Sangers similarly believe that the arrangement will strengthen their position in the chemist sector and see

their new addition as a complement to the Coty range, their other recent acquisition.

Sangers Agencies now handle six brands, and Nick Hodges, managing director, says: "With negotiations to handle further major brands likely to be completed in the next two months, Sangers Agencies have virtually achieved their target number of clients within the original time scale". Two further additions are expected in the near future, one being a line of baby foods.

Del Corporation say Sally Hansen is the "Number 1" brand in nail care, and their ranges will be supported by a "full promotional programme and major advertising in the women's Press". ■

Revlon hunt for Draize substitute

Revlon are to fund research aimed at finding a non-animal alternative to the Draize eye test.

The research will be carried out by the Rockefeller University and under the terms of the grant Revlon will provide about \$750,000 over three years—one of the largest grants of its kind ever made by a cosmetics company, they claim.

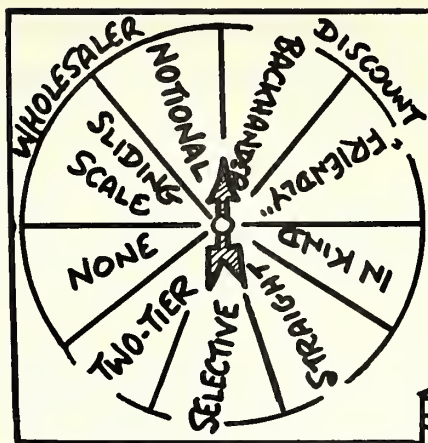
Revlon were recently the object of a demonstration in London protesting against the Draize test (*C&D* December 6, p893). The demonstration involved distributing leaflets which advised passers-by to boycott Revlon and buy cosmetics not tested on animals. A spokesman for Revlon pointed out that the company had been involved in testing alternatives to the Draize test for four years—their cell culture was established in 1977. ■

Bail after pharmacy theft charge

An East Finchley butcher accused of entering a pharmacy and stealing property worth £538 was remanded on bail until January 14 by Highgate magistrates recently.

Mr James Tweedie, aged 22, of Leicester Road, pleaded guilty at an earlier hearing to entering the pharmacy at High Road, East Finchley, on October 26, 1980, and stealing cash, cosmetics and jewellery worth £538 belonging to John Larvin.

Mr Tweedie had been remanded for reports. Two other men who pleaded guilty to the same offence were both fined £100 at an earlier hearing. The pharmacy is that of the president of the Pharmaceutical Society, Mr David Sharpe. ■



Braun say 'That's Life' to Esther

Braun say "That's Life", in response to Sunday's Esther Rantzen feature on their recent hair appliance advertising campaign.

The programme suggested that magazine advertisements for four products—the Quick Style, Traveller, Cool Curl and Protector showed styles, produced by a professional hairdresser using four models, created with a brand of heated roller—Carmen.

In a Press release, issued on Tuesday in response to the programme, Mr Terry Daley, Braun's hair care product manager comments: "Firstly, although heated rollers were used on the session, so were professional tongs, professional dryers and our Braun appliances. The stylist, as a professional, was working under difficult conditions in a crowded studio under bright lights and with limited time. Therefore, as one would expect, he used all the tools of his trade to create the styles. However, we are confident that all the styles shown in the campaign could be reproduced at home using Braun appliances. In fact Ms Rantzen turned down our offer of a free on screen demonstration to prove our point!"

Mr Frank Harris of Little and Strode, Braun's advertising agents, told *C&D* that the campaign is finished and that there are no plans to repeat it. Mr David Williamson of the Advertising Standards Authority (ASA) told us that while he accepted this statement "If the same stills and copy were used again to advertise the Braun Quick Style, they must add a rider to the effect that 'similar results can be achieved using the Braun Quick Style'."

After the issue of the Press release, neither Braun's Terry Daley or Mr Lofquist, their marketing director, were available for comment to *C&D*, Mr Lofquist's personal secretary, Linda Hyde, commenting on behalf of the company said "We don't feel

that we have misrepresented our products."

Mr Harris commented to *C&D*: "The hairstyles shown on the television advertisements were produced using Braun products only, as required by the Independent Television Companies Association (ITCA) code of practice. However in the making of the magazine advertisements the hairstylist—who is also not available for comment being 'somewhere in Italy'—used various professional tools, also heated rollers and Braun appliances.

"Being a professional, and under pressure with four models, four Press ads, POS material and a brochure to produce in six, seven or eight days, he would wish to use his own professional tools." Linda Hyde said that "Braun appliances were used to a degree." Both the advertising and public relations agency feel that in producing stills for magazine advertisements, the use of products or equipment other than those advertised is acceptable, providing that the advertised products can reproduce the same effects.

Braun's public relations company, in addition to their Press release have sent the following poem to Esther Rantzen:

Oh Esther, what a terrible blow
To see our adverts on your show
(This sort of thing, I used to warn
Happened to others—never to Braun)
We must confess—without a whimper
We gave freedom to our crimper
But what you must appreciate
Is 'pros' need licence to create
And everyone—South, East and West
Knows ones own tools are always
best!
But please don't think we would deceive
Or customers money try to thief
And, before you remonstrate
Allow us please to demonstrate.
Braun hair care things can really fix
The styles that featured in our pix
So the happy ending to this story
Is everyone achieves their crowning
glory. ■

Roche reject cancer link with diazepam

Roche have refuted recent claims that diazepam could be a tumour-promoter. The claims were made by Dr David Horrobin, a research scientist in Canada, in a Press release and Roche say these repeat statements made in a letter to the *Lancet* in 1979.

In that letter Dr Horrobin cited the results of his experiments on the effects of diazepam on the growth of transplanted tumours in rats. The results showed that low concentrations enhanced the tumour rate whereas high concentrations did not, he said.

Roche say that most of the experimental work cited by Dr Horrobin was carried out *in vitro* and that the relevance to humans has not been established. His thesis on the effect of diazepam has not been substantiated in an animal model.

Results of a two-year carcinogenicity study carried out for Roche at the Huntingdon Research Centre have failed to support the suggestion that diazepam may either cause or promote tumour growth, the company says. The study is expected to be published in this week's *Lancet*. Figures published in the journal of the National Cancer Institute showed that there was no statistical association between diazepam and human cancer.

Roche also commissioned Dr Francis Roe, an independent consultant in toxicology, to give his opinion. Dr Roe has stated that the experiments reported by Dr Horrobin were not substantial and that none provided evidence of a cancer risk either for man or laboratory animals.

He criticised the size of one of the studies, which involved three groups of seven rats each, and the reliability of using transplantable tumours as models for the study of primary neoplasms. Although not questioning the need for further surveillance of diazepam and indeed all drugs for cancer risks, Dr Roe concluded that there was not an urgent need for a major research programme. ■

Factor fragrances

Max Factor and Ottavio and Rosita Missoni, the fashion designer team, have reached an agreement to market both a women's and men's fragrance under the Missoni name.

Max Factor is to be responsible for the worldwide marketing of the two fragrances and have sole licensing rights to distribution. The women's fragrance is tentatively scheduled for introduction in the Autumn, the men's fragrance following at a later date. ■

LETTERS

Laws required

It is a sad reflection on the doctors at Tenterden that writs have had to be issued.

The principle involved is that of the very survival of our profession and the initiation of regulations to protect members. Are we really in 1981 only to be allowed to practise pharmacy on a "grace and favour" basis, where a doctor does not wish to augment his income?

It cannot be possible for any pharmacy to be economically viable on the basis of the one-mile limit. This should now be changed in our favour, as an amendment to the Clothier legislation.

To see a sister profession apparently intent on our destruction, shows the depths to which standards have sunk. Reasonable behaviour can no longer be assumed. Changes in the Regulations should be enacted swiftly.

Richard N. Thomas
Holyhead

Uncorrected

Thank you for the report (*C&D*, January 3) concerning my complaint against the *Daily Mail*. I would like to make it clear that:

(1) The statement that we made a 15 per cent profit on wholesalers' prices, has never been retracted. In a letter to me, the Editor stated he believed this profit had been reduced to 11.0 per cent. That statement has never been published, in spite of the fact that the DHSS gave the average figure as 11.0 per cent.

(2) The 300 per cent profit claim still stands, so that the public still believe we make an average of 15 per cent profit on wholesale and can make 300 per cent on proprietary tablets.

As the Press Council was presented with official, unarguable facts, it is difficult to understand why this complaint was rejected.

W. R. Foster
Torquay.

Fenbufen

I should like to correct a point made by C. R. Day in his article "Advances in Therapy 1980" in your December 20/27 issue.

It was stated that the chief metabolites of our product Lederfen (fenbufen) are "as active as fenbufen itself" in the treatment of arthritis. In fact, the parent compound possesses no anti-inflammatory activity and Lederfen owes its therapeutic efficacy in toto to its active metabolites, in particular 4-biphenylacetic acid.

It is the fact that the non-gastric irritant, fenbufen, and not the active compound, is in contact with the gastric mucosa which is responsible for the superior gastrointestinal tolerance of Lederfen.

Miss Maryanne Roach BSc, MInfSci
Medical information manager
Lederle Laboratories

25 years on

Arrangements are being made for a reunion dinner at Nottingham University for those students who entered the pharmacy department in 1953, 1954 and 1955. It is intended that the dinner should be held on the evening of Saturday March 21 in Cripps Hall, and overnight accommodation in hall will be available.

The organisers will be sending details to all those former students whose addresses have been traced, but if any of your readers, who were at Nottingham in the appropriate years, require details, it would be appreciated if they would write to me as soon as possible.

D. M. Crossland
1 Ashley Crescent, Warwick.

Rybar inhalers

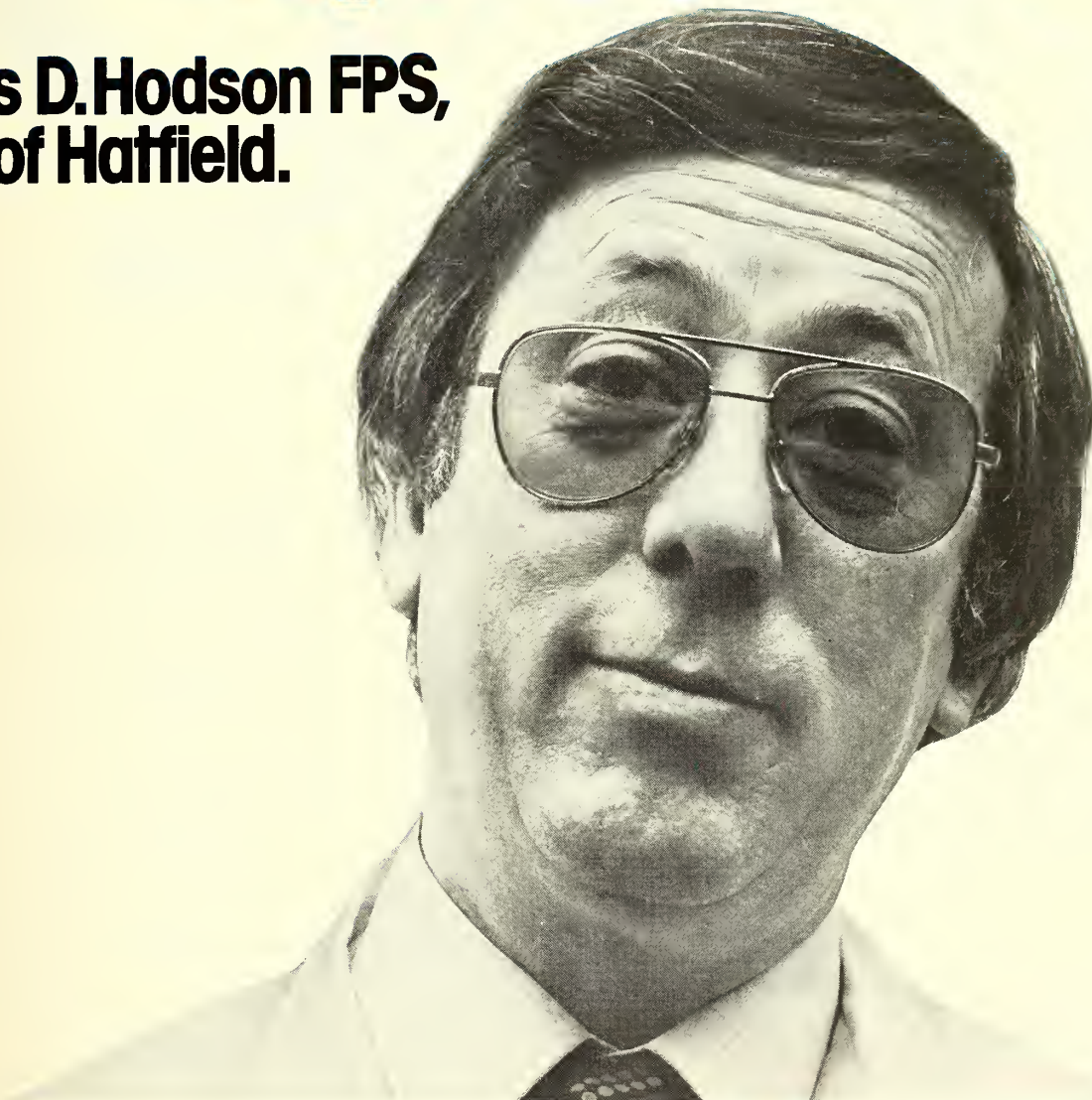
We have been astonished to receive written and telephoned complaints from members of the public informing us that on presentation to pharmacies of prescriptions for Rybar standard inhalers, they have been informed that these are no longer available.

I would be grateful if, through your columns, pharmacists could be assured that Rybar standard inhalers (Drug Tariff October 1980 p14) are in ample supply and should be readily available from wholesalers. I would be grateful if pharmacists would inform me at once in case any local difficulties are encountered.

R. Levin
Managing director
Rybar Laboratories Ltd

“Numark gives me over £200 million buying power.”

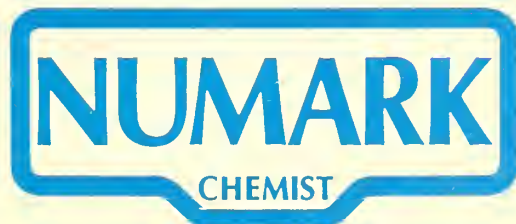
**says D.Hodson FPS,
of Hatfield.**



“To hold your own against the multiples, you’ve got to compete on equal terms. Numark enables me to do just that. The Numark Group’s total turnover gives me all the buying power of the big boys, but leaves me completely independent.

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My customers have even started to look out for the new offers every month. Numark promotions have given a big lift to my sales figures. Up over 30% every month. That’s selling power.”



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make your business grow.**

For more information on the benefits of being a Numark member, contact your local Numark Wholesaler or Charles Morris-Cox at Numark Central Office, 51 Boreham Rd, Warminster, Wilts. Tel: 0985-215555.

Why? Evans?



1 The New Deal

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Evans

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for pharmacists**

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Numark and Beecham golf tournament

Numark and Beecham are sponsoring golf again this year with a second national tournament.

The final will once more be held on the Burma Road course at Wentworth on Thursday, October 15 and the entry qualification will be a club certificate of handicap, signed by a local golf club secretary.

There will be approximately 12 regional finals, with a limitation of 24 players at each. Competitors for the national final will be selected on the Stableford scores gained in the regionals and on a geographical basis. Those selected will make up four teams with each team consisting of two Numark pharmacists or their staff, one franchised wholesaler or employee and a representative of Beecham Proprietaries.

Entry forms will be available from Numark wholesalers or from ICML, 51 Boreham Road, Warminster. ■

News in brief

■ The Wellcome-Franks medical fellowship has been endowed at St Hugh's college Oxford by Wellcome Foundation Ltd. The fellowship is in human anatomy and the name of Franks has been linked with it as a tribute to Lord Franks, chairman of the Wellcome Trust since 1965.

■ Chemists and appliance suppliers in northern Ireland in July dispensed 980,182 prescriptions (602,776 forms) at a gross cost of £3,353,749 with an average cost of £3.42 each.

Figures for August were 895,510 prescriptions (555,020 forms) at a gross cost of £3,125,650 with an average cost of £3.49 each. For September, 1,053,018 prescriptions (655,136 forms) at a gross cost of £3,562,445 with an average cost of £3.38 each, and for October, 1,119,583 prescriptions (698,202 forms) at a gross cost of £3,755,386 with an average cost of £3.35 each.

Deaths

Groundwater. On December 11, Mr William Allan Groundwater, MPS, Snaith, Goole. Mr Groundwater was aged 67 and registered in 1936.

Heggie. On December 26, Mr Robert Bruce Heggie, MPS, Seamill, West Kilbride. Mr Bruce registered in 1938.

Mockett. On December 22, Mr James Chester Mockett, MPS, High Road, Halton, Lancaster. Mr Mockett was 64 and registered in 1938.

TOPICAL REFLECTIONS

By Xrayser

De-notionalised

Well, well, well. The first of the big boys is coming to the view that pharmacists who dislike notional pricing may react by moving a sizeable proportion of their buying to firms who do not charge more than the makers' list price.

I think Vestric are right, because as a typical proprietor idiot, I hated the inevitable fudging of a hard-and-fast known price by a computer factor which varied from maker to maker, which raised the price above that paid by the DHSS and which, depending on the chance percentage "earned" from a variable level of purchases, might reduce the price back to, or below, the number first thought of. Perhaps there are other stolid, unimaginative fellows like me who were so heartily sick of all this shennanigen, and the sense of being misled or confused (whether by the truth or not) that they also tended to place more and more business with firms still charging the proper prices while maintaining good service and some degree of the now obligatory discount.

For me, at least, the basic practice allowance has taken the edge off the cash flow problem—which originally drove me to accept discount deals—so that I can now avoid having to calculate every purchase for the maximum margin.

However, Unichem—who else indeed?—are disappointed, for they say they think it will leave the path open for manufacturers to begin cutting wholesale margins again, which will in turn reduce the considerable amount of money currently used "to ensure the survival of pharmacy." We can therefore anticipate a traumatic erosion of the benefits provided by wholesalers.

Maybe, but I don't think so. Those wholesalers, like Unichem, and Vestric and the smaller ones who have introduced modern VDU computers, have drastically reduced their overheads, have tightened up delivery schedules and, more important, have greatly increased stockturn. Not only will they survive, but they will make profits.

Companies without modern computers and those introducing obsolete equipment, and those who continue to charge above list price will cease to be competitive. They

will lose volume business, which will be hard for their middle management to accept since those I know are working like dogs to keep their companies going—though secretly despairing at the apparent blindness of their directors.

Press gang

There is nothing like a good round figure to catch the eye, and especially if it is a figure like 300 per cent profit and refers to chemists! To get this, all you have to be is a leading High Street chemist—if the *Daily Mail* is to be believed. Makes you wonder why there are no private chemists left in the High Streets.

Instead I find myself grateful for a 26 per cent gross from my competitive suburban parade. Yet the Press Council, like the press gang, rejects the complaint that the *Mail* article was untrue, misleading and based on a false premise.

The *Daily Mail's* attitude has been that the article was not concerned with the minutiae of pharmacist's payments. The Press Council's view would appear to be that it is not interested in the minutiae of the truth.

Split benefits?

There is a product coming onto the market which I think will undoubtedly fill a gap, for in spite of the wonders of calamine lotion, and caladryl and calamine with benzocaine, there exists a need for a more elegant product in aerosol form. And so it would look as though Solarcaine spray, lotion and cream, backed by a big advertising campaign, will find ready acceptance.

Yet I resent the tough marketing pitch which says it will sell in a display stand of 12 aerosols, eight lotions, and eight creams—but only if we purchase 48 articles in all. The protracted hassles of previous SOR schemes have not warmed me towards Plough, the makers (though in fairness *all* SOR deals are troublesome), so that the purchase (not SOR) of four dozens of a product unknown in this country will take some thinking about. Unless, that is, I can split the parcel with a couple of pals, while persuading the rep to come across with some empty merchandisers. . . .

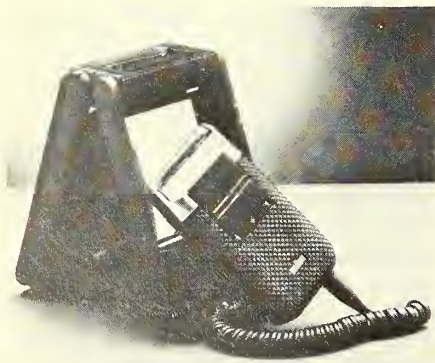
Denture cleanser and more Microns from Braun

Braun are aiming for leadership of the UK shaver market with the introduction of three new models and are also extending their oral hygiene range.

The shavers all come under the Micron label and are classed as the S, the de luxe, and the universal. The Micron S (£24.95) is a cord shaver and features the micron foil, as well as a narrow shaving head for reaching all contours, and a double action on/off switch—one starts the shaver while the second extends the long hair trimmer.

Described as a top of the range cord shaver designed for the perfectionist, the Micron de luxe (£29.95) has several new features including a feed-in comb at the base of the foil which ensures that longer, softer hairs are guided into the foil slots, a soft/hard surface to give an easier grip and a simple foil change system as well as the double action on/off switch. It is available in a matt black finish.

At £49.95, Braun think their Micron universal is probably the most expensive shaver in the world. It incorporates a micro charging unit so that it can be used from the mains or as a rechargeable unit. The casing is solid steel with the soft/hard easy grip surface. The universal comes with its own wall holder as well as a travel pouch complete with mirror. Both the S and the de luxe come in presentation cases with mirrors..



The Micron de luxe with case.

Braun say they are now running parallel with Philips in the men's electric dry shaver market and expect to become brand leader by the beginning of this year. The UK



Denture cleanser with fluid.

company had their best year ever in 1980 with sales up by 32 per cent. They are extending their activity in other fields as well as the shaver market and are introducing a denture cleanser into their oral hygiene range.

The DC1 denture cleanser has been designed to clean dentures more effectively and hygienically by attacking hard plaque. It agitates cleanser fluid containing phosphoric acid and benzalkonium chloride around the dentures. After an initial 30-minute immersion the dentures need only be placed in the cleanser for three to four minutes daily. The retail price is about £18.95 with fluid refills costing £0.95.

Both the shavers and the denture cleanser will be launched at the International Domestic Electrical Appliances trade fair (IDEA) from January 13-15 at the National Exhibition Centre, Birmingham.

The promotional budget for the shavers is £650,000 for the half-year. Both above and below-the-line campaigns will be used. *Braun Electric (UK) Ltd, Dolphin Estate, Windmill Road, Sunbury-on-Thames, Middlesex.* ■

Extra blades

An extra blade for the price of five is offered by Wilkinson on Sword double edged and Profile blades. The Sword are in outers of 50x (5+1) SMC's and the Profile 20x (5+1) SMC's. *Wilkinson Sword Ltd, Sword House, High Wycombe, Bucks HP13 6EJ.* ■

Tubifoam, tights and tennis

Scholl have taken over the retail distribution of Tubifoam. A display outer holding six packs of each width—1¼in and 1in—is recommended to be placed alongside other first-aid items or separately on the counter, for maximum impact at POS. The product will be advertised nationally from April, details to be announced later.

Retailers can win two seats to the Wimbledon 1981 finals if they stock up on Scholl deodorizers within the next few weeks. Scholl representatives will be distributing entry forms for the "Spot the ball" competition, which offers three equal prizes of the Wimbledon seats for two plus luxury hotel accommodation.

The closing date for the competition is May 15 and winners will be notified by May 31. The trade competition will be followed by a consumer promotion, details to be announced later.

Scholl are also offering a 50p refund on their Trimma tights. The packs contain a voucher which the customer sends in and these packs can be identified by a purple sticker. Supporting POS material will be available.

Research has shown that Trimma tights have attracted many new users, Scholl say. Sixty per cent of purchasers had never worn Scholl tights before and 75 per cent of new users had switched from other brands. *Scholl (UK) Ltd, 182 St John Street, London EC1P 1DH.* ■

Vitamin tablet

Riker Laboratories are introducing a multi-vitamin tablet intended for both adults and children.

The tablets—Citramins—contain vitamin A 750 mcg, vitamin C 25mg and vitamin D 5 mcg. Packs are 30- and 120-tablets (£0.69 and £1.69) with each pack containing both orange and lemon flavoured tablets.

Consumer advertising details will be announced later and POS material and an initial bonus are available from the distributors. *Riker Laboratories, 1 Morley Street, Loughborough, Leics LE11 1EP. Distributors: Richards & Appleby, Ltd, Gerrard Place, East Gillibrands, Skelmersdale, Lancs WN8 9SU.* ■

ON TV NEXT WEEK

Ln London	WW Wales & West	We Westward
M Midlands	So South	B Border
Lc Lancs	NE North-east	G Grampian
Y Yorkshire	A Anglia	E Eireann
Sc Scotland	U Ulster	CI Channel Is

Alka Seltzer All areas
All Clear: All areas
Anadin: All areas
Beecham Powders Hot Lemon: All except E

Catarrrh capsules: Lc
Contac 400: All except E
Gibbs SR: All areas
Harmony hairspray: All areas
Limmits Spray & Fry: All areas
Mac lozenges: Lc
Scholl thermal insoles: All areas
Setlers: All except E
TCP: All areas
Topex:

Ln, M, Lc, Y, WW, So, NE, A, We
Veno's: All except E
Vicks Medinite: All except U, G, E, CI
Vicks Vaporub: Ln, So, M, A, Y, NE, Sc
Vicks Inhaler: Ln, So, M, A, Y, NE, Sc

Macleans pinta offer

Macleans and the Dairy Industry are mounting a joint promotion involving the exchange of "pinta points" coupons for a free pint of milk from the consumers milkman or supplier.

The coupons will be carried on 7 million special offer Maclean packs, with six pinta points for one pint of milk. The coupons are valid until September 30 1982. *Beecham-Toiletries, Beecham House, Great West Road, Brentford, Middlesex TW8 9BD.* ■

Purse and holdall from Wella

Wella are launching a new year consumer offer covering their range of hair sets and Blo dry lotions. The offer entitles the consumer to obtain free from Wella a cosmetic purse and holdall set with any three purchases of Wella hair set, color set or Blo dry.

The customer picks up a leaflet at POS and sends it completed with three caps from any of the above lotions (40ml or 100ml) to the address given. POS display material has been prepared including a product tray, a clear polythene leaflet dispenser for attachment to shelf or display unit and, for larger outlets, a "special offer" dump bin with self adhesive header card. *Wella (Great Britain) Ltd, Wella Road, Basingstoke, Hants.* ■

PRESCRIPTION SPECIALITIES

Moducren tablets

Manufacturer Thomas Morson Pharmaceuticals, Merck Sharpe & Dohme Ltd, Hertford Road, Hoddesdon, Herts
Description Blue, square, half-scored tablets, marked "Moducren", each containing hydrochlorothiazide 25mg, amiloride hydrochloride 2.5mg and timolol maleate 10mg
Indications Mild to moderate hypertension
Dosage One to two tablets once daily
Contraindications, precautions, etc Generally, as for other preparations containing hydrochlorothiazide, amiloride, or timolol. See literature
Packs 28 tablet calendar packs (£4.76 trade)
Supply restrictions Prescription only
Issued January 12, 1981 ■

Didronel tablets

Manufacturer Brocades (Great Britain) Ltd, Brocades House, Pyrford Road, West Byfleet, Weybridge, Surrey
Description White rectangular tablets containing etidronate sodium 200mg
Indications Treatment of Paget's bone disease
Dosage Adults—initially 5mg/kg bodyweight daily for a period not exceeding six months. Higher doses not exceeding 20mg/kg daily may be given but if 20mg/kg is used the course must not exceed three months. Should be taken as a single oral dose, with fruit juice or water if desired; eating should be avoided for two hours before and after drug administration. Has not been studied in children
Precautions Patients with restricted vitamin D and calcium intake should be closely monitored as they may be particularly sensitive to drugs affecting calcium homeostasis. Etidronate is excreted intact via the kidney; treatment of patients with impaired renal function should be approached carefully, if at all. Therapy has been withheld from patients with enterocolitis. No experience of use in pregnancy; should be used only when clearly needed in women who are or may become pregnant. Response to therapy may be slow and may continue for months after discontinuing treatment. Dosage should not be increased prematurely nor should treatment be resumed before there is clear evidence of reactivation of the disease process; retreatment should be undertaken only after a drug-free

period of at least three months. Increased or recurrent bone pain at existing Pagetic sites and/or appearance of pain at previously asymptomatic sites has been reported, resolving during therapy in some cases. Risk of fracture may be increased at doses of 20mg/kg/day for more than three months; if fractures occur drug should be withheld until healing is complete. See literature
Side effects Gastro-intestinal complaints such as loose bowel movements and nausea are increased in some patients receiving over 5mg/kg/day
Packs 60 tablets (£29.88 trade)
Supply restrictions Prescription only
Issued January 1981 ■

Monotrim tablets

Manufacturer Duphar Laboratories Ltd, Gaters Hill, West End, Southampton SO3 3JD
Description White, flat, round tablets with bevelled edges, imprinted with the manufacturer's symbol on one face with a single break bar on the other and coded "AE/2". Each tablet contains trimethoprim 100mg
Indications Treatment of susceptible infections used by trimethoprim-sensitive organisms including urinary and respiratory tract infections
Dosage In acute infections for adults and children over 12, two tablets; 6-12 years, one tablet; 6 months to 5 years, half a tablet, all twice daily. Treatment should continue for at least one week. The first dose can be doubled. Approximate dosage in children is 8mg/kg/day. For long-term treatment and prophylactic therapy, dosage is one tablet at night for adults and half a tablet at night for 6-12 years. Approximate dosage in children is 2mg/kg/day. For dosage in reduced kidney function see data sheet
Contraindications etc As for other trimethoprim preparations
Packs 100's (£4.95) 500's (£21—trade)
Supply restrictions Prescription only
Issued January, 1981. ■

Mini-gravigard

Searle have introduced Mini-gravigard, an intra-uterine copper contraceptive device (£4.54). It is designed for the smaller uterine cavity and provides nulliparous women with an alternative to the Gravigard. The Mini-gravigard is in the shape of a 7 with a 22mm transverse arm and 28mm vertical arm. Electrolytic copper wire is wound on to the vertical arm of a plastic carrier impregnated with barium sulphate.

The device should be replaced every two years. It is not yet included in the Drug Tariff. *Searle Pharmaceuticals, Whalton Road, Morpeth, Northumberland.* ■

Bayer enter sweetener market with Natrena

Bayer are entering the £13 million artificial sweetener market with Natrena, claimed to be Europe's number 1 brand, and are backing the launch with a £650,000 advertising and promotional campaign.

Natrena comes as tablets and liquid; the major benefit being claimed for the tablets is that they have a less bitter after-taste than other sweeteners based on saccharin. Natrena tablets contain saccharin sodium 10mg plus two compounds which the company is keeping a "trade secret." One compound lessens the taste bud's perception of the bitter saccharin after-taste; the other enhances the sweetness of saccharin so that less need be used. Natrena is quick-dissolving and leaves no scum. One calorie-free tablet has the equivalent sweetness of one teaspoonful of sugar.

Bayer say that Natrena's presentation also offers the unique advantage of refillable dispensers. The table pack (600, £0.89) and handy pack (120, £0.32) dispensers may be filled from an economy refill pack (2,000, £1.90). The table pack has a one-by-one push-button action. Natrena liquid, containing 3.6 per cent sodium saccharin in demineralised water, is presented in a 125ml glass bottle (£1.35) with a "snip" nozzle.

Consumer tests

The company explains that Natrena was well accepted in consumer tests both in terms of taste and presentation, with 87 per cent of respondents interested in using the product and 75 per cent rating it better than their usual brand. Response to the orange and white dispensers indicated that many consumers would buy the brand purely on the strength of the container, leaving aside any preference for the product itself. All the respondents liked the idea of being able to refill the dispensers.

Summarising this research, Charles Lee, product manager for Bayer UK Ltd's consumer products division, says: "We know that consumers are not satisfied with the after-taste left by existing sweeteners. So far, they have had no alternative but to accept it. What brand loyalty there is appears to be generated by a resigned acceptance

of existing products shortcomings. 'Why switch brands when the next one is exactly the same?' seems to be the attitude of most consumers.

"Natrena is the alternative they have been looking for—and it's what

1975. Women accounted for 61 per cent of the total.

Bayer's promotional strategy is geared to motivating trial by persuading sweetener users that Natrena has a less unpleasant taste than current products. Sampling, couponing and point-of-sale material are included in a £150,000 below-the-line campaign to support the television, radio and Press advertising. The campaign has been designed to gain exposure for the brand throughout the year. Advertising in the



the market needs. Tablet sweeteners haven't progressed for years. Manufacturers have offered extra frills in terms of packaging and dispensing, but no new benefits when it comes to taste. Against such a background it is hardly surprising that, in our consumer tests, all respondents said they would willingly switch to a new brand if it tasted more like sugar."

Bayer estimate that the 1980 market for artificial sweeteners was worth £11 million, with tablets accounting for £9 million and the balance made up by liquids, granules and powders. The company projects that the market will increase in value by 15-20 per cent per annum and that 1981 sales will be worth £13 million, tablets taking an £11 million share.

Chemist outlets, including Boots, accounted for 79 per cent of total sales during 1980 and the four leading brands carved an 88 per cent slice of the market between them. Product penetration has been of a low level in recent years. In 1979, 21 per cent of the adult population (8,879,000) used sweeteners—the same number as in

women's Press is planned to run from April-June with a further burst later in the year. The television campaign is expected to start May-June. *Bayer UK Ltd, Burrell Road, Haywards Heath, West Sussex RH16 1TP.* ■

Sahara colours from Rubinstein

Sahara colours are the fashion statement from Rubinstein this spring. The collection includes three new lipstick and nail shades: africoral, red sunset and Sahara rose (£1.95 and £2.10 respectively). Lip contour pencils are available in three new shades of raisin, wine and red (£1.95). There are two powder eyeshadow duos—golden olive with oasis peach and fresh fig with pink mirage (£3.95) and a pressed powder blusher duo—red dust with peach Afrique (£5.50). The new colours will be on counter in February. *Helena Rubinstein, Central Avenue, West Molesey, Surrey KT8 0RB.* ■

COLIC IS BAD NEWS FOR BABIES AND THEIR MOTHERS



NOW DENTINOX HAS

GOOD NEWS FOR BABIES, MOTHERS AND CHEMISTS



New Dentinox Colic Drops. Specially formulated to break down ingested air bubbles, for quick and effective relief from wind and griping pains. All in a small, easily administered dose.

So if mothers with colicky babies come to you for advice, remember Dentinox Colic Drops.

For a free trial pack, contact Dendron Limited, 94 Rickmansworth Road, Watford, Herts WD1 7JJ. Tel. (0923) 29251.

PL No 0133/0022. Pharmacy only

Dentinix drops for colic

An oral drop formulation for infant colic, containing dimethicone has been launched by Dendron Ltd.

Dentinix infant colic drops are available in 20ml dropper bottles (£0.79) in outers of six. The formulation is intended to break down ingested air bubbles to relieve wind and griping pains. Free trial packs from *Dendron Ltd, 94 Rickmansworth Road, Watford, Hertfordshire WD1 7U.* ■

Glendon change of distribution

Glendon Packaging Company Ltd have terminated their sales distribution agreement with Thomas Christy Ltd.

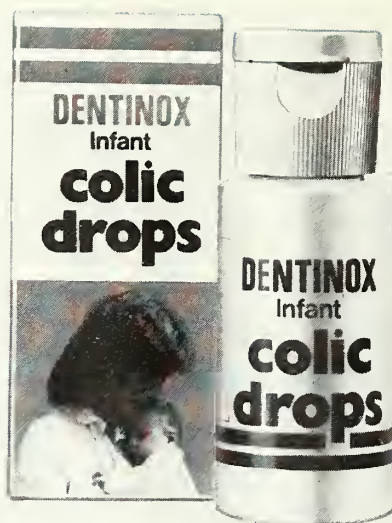
A separate company has been formed to handle Refresh, Nomor Grey and the Econoshave range of razors and blades. New product launches are planned, say Glendon, and the new company is structured to handle considerable growth. The sales force will be headed by Mr J. Haywood and all inquiries and orders from January 1 should be directed to *Worldwide Toiletries Ltd, Church Street, Emley, nr Huddersfield, Yorkshire. Telephone 0924 848722.* ■

Concerted campaign for Complan

A display unit for flavoured Complan is being offered by Farley Health Products. The vacuum-formed durable white plastic unit is designed to display the three varieties—strawberry, chocolate and butterscotch—and is suitable for window, counter or shelf display. It is obtainable from Farley Health Products' representatives who also have details of a bonus offer.

The second burst of a television advertising campaign for natural flavour Complan, which is on test market in the Trident television area, breaks on January 26 for three weeks in Tyne Tees and two weeks in Yorkshire. This natural flavour variety is a relaunch of plain Complan.

The 30-second commercial, using the theme "On the road to recovery you need five star fuel", emphasises the positive health aspects of Complan



and is designed to appeal to all ages. The theme is being carried through all aspects of support from trade and recommender Press advertising to the point-of-sale material which includes show cards, shelf strips and floor display units.

While the relaunch is proceeding in the Trident area, a poster campaign is being held in the rest of the country. Promoting Complan on prime poster sites for the first time, the campaign also features the "Road to recovery" theme. *Farley Health Products Ltd, Torr Lane, Plymouth PL3 5UA.* ■

Slalom prediction

Gillette are predicting a 3.5 per cent sterling market share for their Slalom pivot head disposable razor in 1981. This projection is based largely on the razor's sales figures in the United States, where it was first launched seven months ago, and took 2.4 per cent of overall wet shaving market in the first three months. *Gillette UK Ltd, Great West Road, Isleworth, Middlesex.* ■

Flushable Bodyform

Bowater-Scott's Bodyform is now fully flushable and, it is claimed, even more absorbent.

A special price marked pack of 12 towels for £0.43 is available for a limited period. Bowater-Scott say that the product will continue to be supported by heavyweight advertising and promotional material.

Bowater-Scott Corporation Ltd, Bowater-Scott House, East Grinstead, West Sussex. ■

Paddi Cosifits in £2m drive

Robinson's are mounting a £2 million consumer drive for Paddi Cosifits. The "conga" television advertisement, together with a new series on this theme, will be screened nationally from January 29 through to December 1.

A Press campaign with two-colour advertisements will appear in baby annuals in May/June and mother and baby publications from March until December. In addition, a mailing and sampling programme, including a £0.35 coupon distribution on Paddi Cosifits, will operate throughout the year.

Paddi Pads and Babettes will also be heavily promoted this year in mother and baby publications and baby annuals. A free iron-on fabric transfer in six different designs is being offered on the Babettes 20s pack.

Two new 200s packs have been added to the Paddi and Debs ranges of cotton wool balls. Launch discounts and shelf-talkers are available. *Robinsons of Chesterfield, Wheat Bridge Mills, Chesterfield, Derbys S40 2AD.* ■

Brighter Dr White's

Lilia-White are introducing new packs for Dr White's sanitary towels and are changing the outer size.

The packs have a brighter design for greater shelf impact with a butterfly and flowers in pastel shades. The outers have been changed to two dozen and four dozen in order to conform with the company's other products. *Lilia-White Ltd, Alum Rock Road, Birmingham B8 3DZ.* ■



Mentholatum

announce the introduction of **DEEP HEAT spray**

"DEEP HEAT" is probably the best known brand name for the relief of Rheumatic and Muscular pain.

It is regularly supported by the biggest advertising budget in the whole field of topical anti-rheumatics.

ADVERTISING SUPPORT
The introduction is backed with advertising in -

Daily Express

Daily Mail

Daily Mirror

Sun

T.V. Times

Sunday Post

Daily Record

Now after many requests from the Trade and Consumers there is an aerosol version of this famous brand.

For even greater sales use the point of sale crowner which is included with every ½ dozen Deep Heat Spray cans.



Actual size can

ORDER NOW

**AVAILABLE FROM
1st JANUARY 1981
THE ONLY SPRAY
TO OFFER
DEEP HEAT
RELIEF**

THE MENTHOLATUM COMPANY LTD.,
Longfield Road, Twyford, Berks.



Vichy products are made by people who have a thorough understanding of the skin.

Its needs. Its problems. Its minute variations.

We believe it's only reasonable, if not vital, that our products should be handled by people with a similar understanding.

Not just for the sake of good business, but for the sake of the customer.

For this reason, Vichy products continue to be sold only through chemists.

Only a chemist is likely to appreciate the pains we take to ensure the standard of every Vichy product.

All our products for example, are formulated, manufactured and controlled to ensure their efficacy, and to minimise the risk of allergic reaction.

All have guaranteed shelf life of at least three years with the formulations clearly and accurately marked, so that you can better advise

your customers. Where possible, we use tubes rather than jars.

A choice dictated not by the whims of design, but by the demands of hygiene.

The narrower neck greatly reduces the chance of contamination by air.

Where tubes are inappropriate, we use glass bottles rather than plastic, for similar reasons.

The result of measures like these and many others is a range of skin care formulations that a chemist can recommend to a customer from a position of understanding and confidence.

They will provide the simplest solutions to a woman's skin care problems.

In our experience, this is also the formula for successful business.

☒ **VICHY** SKIN CARE
At your chemist.

From one chemist to another.



New Elastoplast Heroes. Your customers are crying out for them.



Presenting Elastoplast
'Heroes.' A new kind of dressing
strip with printed medal designs.

They're eyecatching, witty and
they're going to be a real craze with
the kids. How do we know? Easy.
We've already tested 'Heroes' in
research and the response was
overwhelming. The kids thought
they were knockout.

We've got a great idea to get the
'Heroes' craze started.

We're going to give away over
a quarter of a million free strips
in children's comics.

There'll also be a heavy advert-
ising campaign in comics, so it
won't be long before the kids will
be pointing their mums towards the
nearest stockist.

'Heroes' is available as a $\frac{1}{2}$ metre
and a 15cm strip. Make sure you
keep plenty in stock, we wouldn't
want you to do the crying as well.

Elastoplast HEROES



SMITH & NEPHEW LTD., WELWYN GARDEN CITY. TELEPHONE WELWYN GARDEN CITY 25151.

Three-step skin care by Sassoon

Vidal Sassoon is to introduce a three-step total skin care line in February similar to the hair care line.

"Consumer research," the company says, "supports Sassoon's credibility not only as one of the world's leading authorities on hair, but also as a contemporary beauty authority."

With the Vidal Sassoon skin care range, the company says it is "moving to provide consumers with the luxury, prestige and quality of department store cosmetics at the price and convenience of the toiletries market."

Ingredients include soluble collagen, elastin, a hyaluronic acid derivative and an ultra-violet inhibitor.

The range comprises balanced complexion bar (100g, £1.30) to cleanse the skin, skin balancing rinse (175ml, £2.35) for conditioning and multi-action moisture cream (60g, £2.35) and moisture lotion (100ml, £2.35) to moisturise and protect. Balancing rinse, moisture cream and lotion all come in "unbreakable" ivory bottles and like the complexion bar are packaged in the familiar Sassoon livery of brown cartons with silver graphics.

£1million advertising spend

One million pounds is earmarked as the 1981 advertising spend for the skin care range. This will include a national television campaign with the first burst due to start in early March. The campaign theme promises soft, supple, young-looking skin if the three-step skin care plan is followed and contains the Sassoon philosophy "If you don't look good, we don't look good". In addition to television, advertisements will run in the women's Press from February.

For POS, a display unit with header card will be available. The unit comes pre-packed with four each of the balanced complexion bars and skin balancing rinses, six moisture lotions and three moisture creams. Each unit will carry 12 skin care trial packs (£0.99).

Also available will be a 15in shelf talker with a product leaflet dispenser. *Vidal Sassoon Co Ltd, 1 Bedford Street, London WC2E 9HD.* ■



Umbrella offer on Batiste

Schwarzkopf are running a self-liquidating umbrella offer on their Batiste shampoos. A free POS leaflet, entitled "Your guide to hair beauty" explains the benefits of Batiste shampoos to people with various hair types, and the back of the leaflet features a fashion umbrella with a carved wooden handle, for £6.50.

Order forms for the offer, which closes on March 1, are printed on special collars placed on 200ml wet shampoo bottles and on the dry shampoo cans. *Schwarzkopf Ltd, Penn Road, Californian Trading Estate, Aylesbury, Bucks.* ■

Ritz spring petals

For spring, Charles of the Ritz introduces Silken Petals which includes the new shades of amboise Ritz Mat make-up and petal pinkglow Revenescence Cheekglow. For the lips there is a peach shade of Ritz lips (no 24) complimenting rose petal and silk beige nail polishes. *Charles of the Ritz, 51 Charles Street, London W1.* ■

Roc addresses

Roc's sales, warehouse and accounts division are now operating from the new complex in Newhaven. The head

office will still be located at 46 Mount Street, London W1 but all queries relating to sales, deliveries and accounts should now be directed to the new division at Avis Way, Newhaven, East Sussex BN9 0JX (telephone 07912-7704/7723/7841).

Roc have also improved their service to stockists in Northern Ireland and have appointed Mr M. Carroll of Manor Court Agencies, 25 Fitzwilliam Square, Dublin 2 (telephone Dublin 785997) to represent the company in the Province. ■

Carefree coupon

Johnson & Johnson are offering a 10p coupon on flashed packs of Carefree Panty Shields.

The coupon can be used towards the purchase of any sanitary protection product, or for Carefree or Vespene.

Carefree will be supported by advertising during 1981 and the special offer will be promoted at POS with shelf strips. *Johnson & Johnson Ltd, 260 Bath Road, Slough, Berks.* ■

Spring showrooms

John O'Donnell, Fine Beauty Accessories, Box 33, Chelmsford.

London, Britannia Hotel, Grosvenor Square, January 18-20.

Harrogate, Crown Hotel, January 26-28.

Glasgow, Central Hotel, February 15-17. ■

OUR COMPETITION LOSE THE

3 *macleans* **PINTA POINTS**

COLLECT 6 POINTS FOR 1 EXTRA PINTA FREE!

To the Consumer
Macleans toothpaste are offering you free extra pintas. All you do is cut out and save these Macleans 'Pinta Points'. When you have collected six points give them to your Milkman/Supplier, who will exchange them for a free extra pint of ordinary pasteurised milk.

To the Milkman/Supplier
For redemption of these points please forward via your dairy to the 'Pinta Points Redemption Centre', P.O. Box 1000, East Grinstead, West Sussex RH19 3SP. You will be refunded for the controlled maximum price of a pint of ordinary pasteurised milk for every six points submitted.
Valid Until September 30th 1982.

Alternatively,
send 12 Pinta Points to the address on the Pinta Point voucher and you will receive coupons for 2 free extra pintas redeemable at your milk store. Please write your name and full address in BLOCK CAPITALS on the reverse of the voucher. Allow 28 days for delivery.

Macleans and milk - good for your family 125 ml

FREE EXTRA PINTAS
NEW *macleans* FRESHMINT FLAVOUR

NEW FREE EXTRA PINTAS
macleans SEE BACK FOR DETAILS

BEECHAM TOILETRIES won't get left out

with
FLUORIDE

White-Ultra

TORS COULD R BOTTLE.

This latest Macleans offer—'free extra pintas'—is going to cream the competition!

Jointly mounted by Macleans and the Dairy Industry, this massive promotion will involve no less than...7 million special offer Macleans packs... and over 40,000 milkmen.

Every Macleans customer has only to give the 'Pinta Points'—collected off as few as two special-offer packs—to her own milkman *on her own doorstep* and he'll provide her with a free 'extra pinta.'

So stock up well. An offer like this will bring your customers pouring in. **BEECHAM TOILETRIES**

ne shelf. I **Macleans** ETRIES won't

Respiratory disorders: Part 2. Asthma

The fourth in a series of articles by Mr B. W. Burt, Mr R. J. Greene and Dr N. D. Harris, Chelsea College, department of pharmacy, University of London.

Asthma is distinguished from chronic obstructive pulmonary disease in that the obstruction is primarily a constriction of the smaller bronchioles, and is reversible. Furthermore its aetiology is more varied and less understood.

The main characteristic is of an excessive reactivity of the bronchiolar tissue, but again there seems to be a spectrum between two main types. Some 20 per cent of asthmatics have the extrinsic variety, which is almost certainly allergic. A further 50 per cent have the intrinsic variety, whose aetiology is more obscure—the bronchioles may be hypersensitive to non-specific environmental irritants, and in its severe form this group merges with chronic bronchitis. The remainder have a mixed condition, or still more obscure pathologies. The **extrinsic asthmatic** is frequently atopic, that is, generally allergic, and so may be some of his (or her—the sex distribution is equal) family. There

will be a history of eczema, hay-fever, food allergies, etc. Often attacks will start in childhood, and although many patients grow out of them, in others the condition persists.

In all cases the attack, characteristically an acute onset of severe dyspnoea, wheezing and tight cough, accompanied by panic, is triggered by an allergen. The mechanism is shown in fig 2. The allergen, which is usually inhaled but may be ingested, is recognised by a specific type of immunoglobulin, IgE, first produced by the initial exposure. The IgE attaches itself to mast cells, which are inflammatory cells located in most tissues. For reasons which are not clear, the mast cells in asthmatics undergo unusually massive degranulation, releasing inflammatory mediators such as histamine and SRS-A whose principal effect is rapid and intense bronchoconstriction. This is a typical Type-1 immediate hypersensitivity reaction and is blocked by sodium

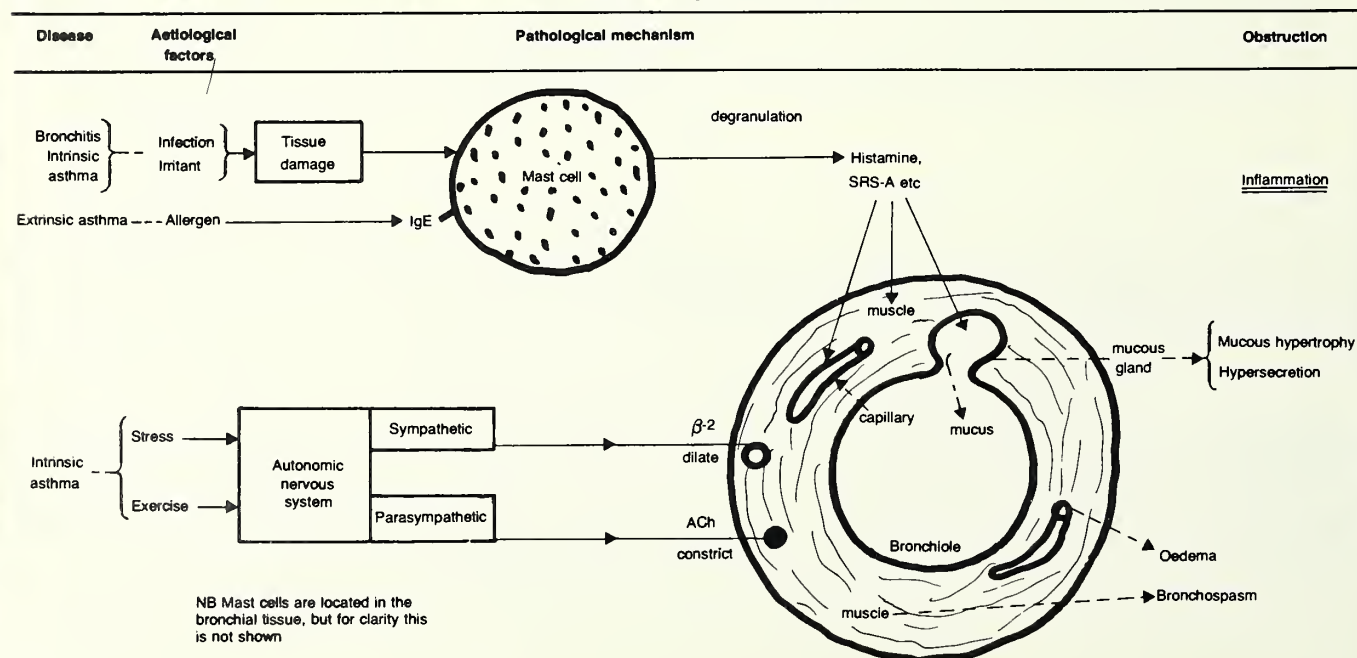
cromoglycate (SCG) but not by steroid. A Type-3 delayed reaction also occurs after six to eight hours, involving serum antibodies and complement (not shown) which is blocked by both SCG and steroids.

There is, compared with bronchitis, proportionally less mucous involvement. Typical asthmatic allergens include pollen, animal dander, and mites in house dust. Most patients are in fact sensitive to more than one. There is also a higher incidence of drug sensitivity, especially to aspirin, amongst asthmatics, and this too can trigger attacks. This type of asthma is generally intermittent, with normal breathing between attacks, and is eminently treatable.

Intrinsic asthmatics, though not atopic are sensitive to a variety of trigger factors, including short bursts of violent exercise, a special problem with children. The mechanisms are shown in the lower pathway of fig 2. It is probably mediated mainly by the autonomic nervous system, which controls bronchial smooth muscle. Possibly this form is due to an imbalance between the parasympathetic and sympathetic components, or between different prostaglandins. In addition to characteristic asthmatic attacks, intrinsic asthmatics tend to have a persistent wheeze between attacks, and are far more difficult to treat. Although stress and anxiety can be trigger factors, the notion that asthma is entirely

Continued on p48

Figure 2: Summary of possible aetiology and pathology of airways obstruction



SHOWRAX for the Modern Pharmacy

NEW
RANGE



The Best of Both Worlds

With all the problems surrounding prescription income, the key to prosperity for today's Pharmacist lies in increasing turnover from a well-planned and attractive front-shop area. But how do you choose the right display method?

Until now the choice was usually between a standard display system, which allows for very little individuality, or a totally custom-made interior, involving expensive designers, specialist carpentry and many days of lost turnover.

Now Showrax, Britain's leading manufacturer in retail display, have launched a brand new range of equipment. It combines the low-cost benefits and flexibility of a modular system, with the freedom to choose the exact colours, materials and layout you require, within the standard range.

All the facts on our new equipment, and everything you need to know about pharmaceutical shopfitting is in our "Pharmacy Information Pack" which is yours for the asking.

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psychosomatic is no longer tenable.

Standard respiratory function tests are done on asthmatics to assess the degree of obstruction. During an attack they will have a low tidal volume, low PEFR, and much reduced FEV₁/VC ratio. Usually there will be a high degree of reversibility with bronchodilator inhalation. Their sputum will be very viscid and usually non-purulent, and will contain excessive eosinophils: This is very characteristic of asthma.

The serum of extrinsics has high levels of IgE. The search for specific allergens in extrinsic asthma is rarely successful. Skin tests usually show multiple allergies and even sophisticated radio-immunological tests are little more helpful. A bronchial challenge test is more specific, if less agreeable—the patient inhales suspected allergens to see which precipitates an attack. For all asthmatics a diary of attacks may reveal probable environmental trigger factors.

Management

Management of asthma is twofold—prophylaxis and relief. **Prophylaxis** means prevention or suppression of incipient attacks. The primary aim is avoidance, if possible, of identified trigger factors and rapid treatment of bronchial infection. Desensitisation, formerly called hyposensitisation, with a specific allergen or a small number of

possible ones, is occasionally helpful for some extrinsics; the regular subcutaneous inoculation of tiny amounts of allergen may build up high serum levels of IgG ("blocking antibodies") which may then neutralise allergens on challenge before they react with IgE. Sodium cromoglycate or the newer ketotifen, (see table 2) will prevent mast cell degranulation, and are highly effective as prophylactics, but completely ineffective in established attacks—so compliance is important.

Continuous therapy with sympathomimetics or xanthines may benefit intrinsic asthmatics in particular by countering the persistent low grade bronchospasm. Severe cases may need oral steroids to suppress inflammatory responses. Particularly anxious patients may benefit from anxiolytics such as diazepam.

Relief involves the use of the same bronchodilators as are used in CB, though they are more reliably and dramatically effective in asthma. Aerosol sympathomimetics are now the drugs of choice. Aerosol steroids may shorten attacks by suppressing delayed inflammatory responses.

For a severe, persistent attack, unrelieved by the patient's normal therapy (status asthmaticus) subcutaneous adrenalin may be used in an emergency prior to hospitalisation, but intravenous salbutamol, aminophylline and hydrocortisone, is now the treatment of choice. High dose oxygen may also be needed. All sedatives are contra-indicated. When the attack comes under control,

treatment is continued with inhalation of salbutamol—possibly using a nebuliser and intermittent positive pressure respirator—and rapidly reducing doses of oral prednisolone.

Drugs for airways obstruction

Only bronchospasm yields significantly to therapy. As yet there are no beneficial ways of interfering with mucus production. Thus asthma is better controlled than CB. Figure 2 indicates possible approaches to bronchodilation, and table 2 lists the drugs used. (The drug therapy of cough was reviewed by Li Wan Po in *C&D* November 4, p773).

Clearly, the most satisfactory method where mast cells are implicated is to prevent their degranulation. If this is unsuccessful, agents which counter the effects of released mediators would seem desirable. Mimicking the bronchodilator effects of the sympathetic nervous system, or blocking the constrictor effects of the parasympathetic nervous system, should be helpful in limiting the effect of mediators or restoring the balance of the autonomic nervous system. Non-specific smooth muscle relaxants, such as the xanthines, counteract bronchoconstriction of any origin. Finally, since the inflammatory response is implicated in most lesions, steroids may be used for blanket suppression.

Degranulation inhibitors

Sodium cromoglycate (SCG) has revolutionised the treatment of asthma by providing true prophylaxis. Its precise mode of action is uncertain, but it effectively inhibits the release of the mediators of inflammation and bronchoconstriction. However, it seems to be effective only in asthma; in bronchitis, possibly due to the difficulty of its access to the sites of action when there is a lot of mucus in the bronchioles, it is of no benefit.

Though not absorbed orally, the inhaled powder is usually absorbed satisfactorily by the lungs. A powder is used because the relatively high dose needed precludes an aerosol solution. The transient bronchospasm this may cause in some hyper-irritable asthmatics can be overcome by using the formulation containing a small dose of isoprenaline. Remarkably few other adverse effects have been reported, which is fortunate because lifelong treatment may be needed. SCG will reduce or abolish severe asthmatic attacks, though some patients will still need sympathomimetics either regularly or as a standby. Rarely, tolerance may develop. Since the patient becomes

Table 2: Drug therapy in airways obstruction

Degranulation inhibitors		
Sodium cromoglycate	Spincap inhaler	(Intal)
Sodium cromoglycate + isoprenaline	Spincap inhaler	(Intal Co)
Ketotifen	po	(Zaditen)
Bronchodilators		
<i>(a) B-sympathomimetics</i>		
Orciprenaline	Inhaler, po	(Alupent)
Rimiterol	Inhaler	(Pulmadil)
Salbutamol	Inhaler, po, slow release	(Ventolin)
Terbutaline	Inhaler, po, slow release	(Bricanyl)
<i>(b) Anticholinergics</i>		
Ipratropium bromide	Inhaler	(Atrovent)
<i>(c) Xanthines</i>		
Aminophylline	po, pr	(Phyllocontin)
Aminophylline (slow release)	po	
Choline theophyllinate	po	(Choledyl)
Diprophylline	po	(Neutrophylline)
Theophylline:	microfined	(Silbephylline)
	slow release	(Nuelin)
		(Theograd)
		(Slo-Phyllin)
		(Entair)
	+ guaiaphenesin	(Labophylline)
	+ lysine	(Theo-Nar)
	+ noscapine	
STEROIDS		
Beclomethasone	Inhaler	(Becotide)
Prednisolone	po	

Continued on p53

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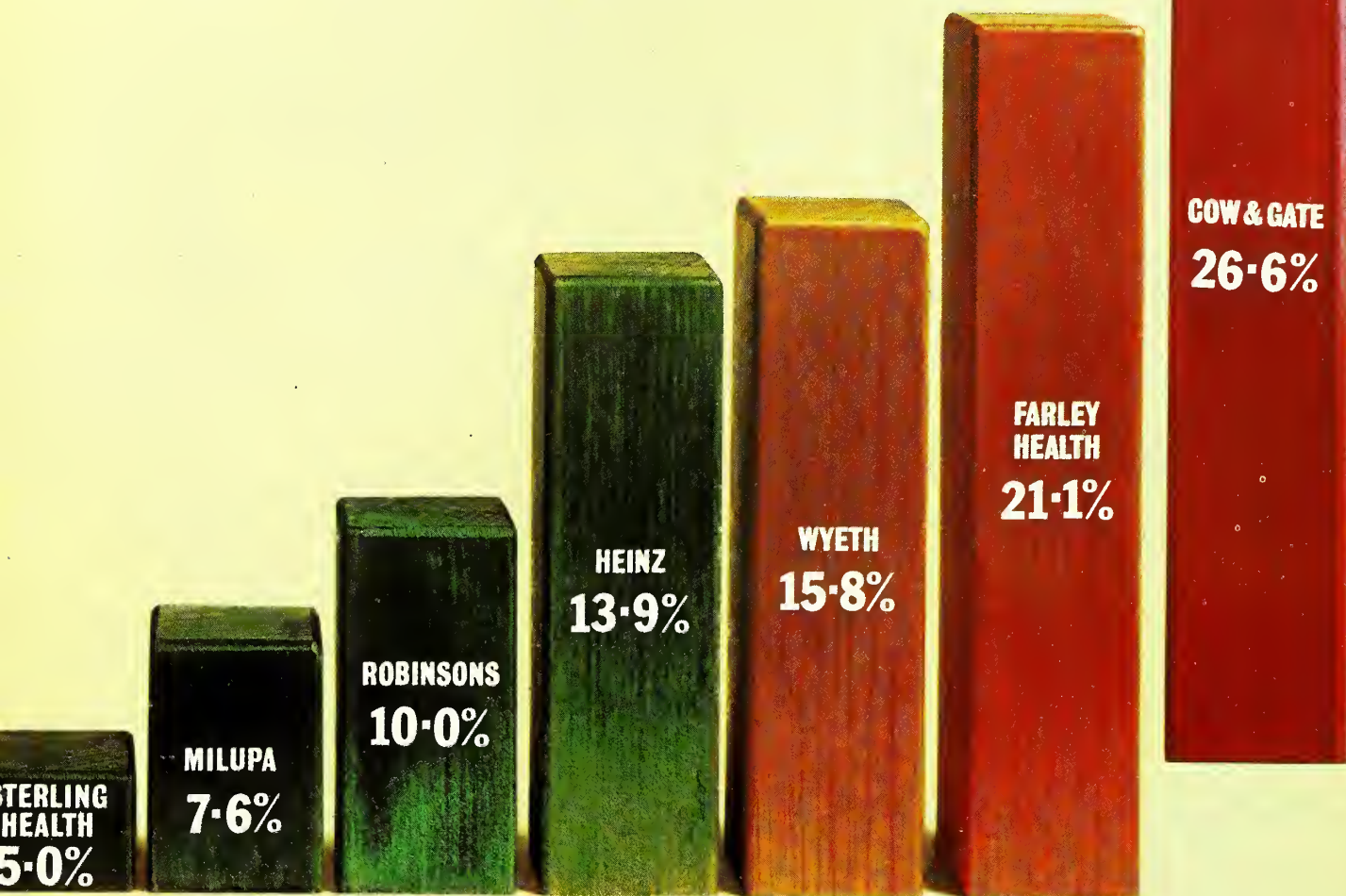
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The Babyfeeding Specialists

Clinical pharmacy

Continued from p48

dependent on SCG, special care must be taken in starting, stopping or transferring to, or from, another drug, just as with steroids.

The newer *ketotifen*, if it proves as effective and safe as SCG, may offer a valuable improvement in patient acceptability and compliance, since it is absorbed orally. However, it is also an antihistamine, and while this may contribute little to its therapeutic effect in asthma, it does produce typical sedative side-effects.

Mediator antagonists

Although conventional *antihistamines* (H-1 blockers) are effective in reducing the vascular effects of local inflammation, that is, redness and oedema, in most tissues, they do not prevent the bronchoconstriction. It is thought that during inflammation, histamine is released so extremely close to bronchial muscle that access by exogenous antagonists is difficult.

Other possible approaches, which are clinically ineffective at present, are to use blockers of SRS-A or certain bronchodilator prostaglandins, the latter being unsuccessful for biopharmaceutical rather than pharmacological reasons.

Sympathomimetics

Isoprenaline and *ephedrine* have long been used for their ability to relax bronchial smooth muscle by virtue of the effect on β -receptors. However, their stimulant effects on the heart, and with *ephedrine*, on the CNS too, limited their use, especially in the young and the elderly. Indeed, a minor epidemic of sudden heart deaths in asthmatics in the 1960's has been attributed to overuse of high dose isoprenaline inhalations in patients whose bronchioles had become tolerant but whose hearts were still sensitive to stimulation.

Following the discovery of different adrenergic receptors in the heart (β -1) and the lung (β -2) a new generation of relatively bronchospastic agents has been developed, of which *salbutamol* is the prototype, and these often give excellent relief. However it must be remembered that none is completely free from cardiovascular effects, and caution is still required in high risk patients (that is, children, the elderly, and patients with hypertension, heart failure and arrhythmias). Other problems are CNS stimulation (like *ephedrine*), long-term tolerance (loss of sympathetic drive) urinary retention (relaxation of the bladder), and the now familiar "salbutamol tremor"—a fine tremor of the extremities. Potential interactions are with MAOI's, tricyclic depressants, and antihypertensives.

Undoubtedly the low-dose, locally acting aerosol inhalations have greatly reduced adverse reactions by reducing

the total body doses (though the drugs are well absorbed into the circulation via the lungs). Newer agents seem to offer little advantage, except perhaps the fast, short acting *rimeterol*. A variety of apparatus is offered for administering these drugs; this is certainly an area where the pharmacist can help patients.

Clearly these drugs cannot prevent allergic responses, but they can limit the effects, especially in an acute asthmatic attack. In non-allergic patients—asthmatics and bronchitics—continuous low dosage can improve lung function. They are believed to act by increasing the build-up in smooth muscle cells of an important nucleotide, cyclic adenosine monophosphate (cyclicAMP). This seems to inhibit adenosine triphosphate (ATP) from fuelling contraction.

Anticholinergics

In some patients, presumably those with a high degree of vagal (parasympathetic) bronchoconstrictor tone, anticholinergics may be helpful. There is evidence that they can enhance the effect of sympathomimetics, and the combination gives a powerful, prolonged bronchodilation. Once again the use of aerosols prevents serious systemic side-effects. However cardiovascular problems are still possible since the normal inhibitory tone of the vagus nerve on the heart will be impaired.

Xanthines

Alkaloids related to caffeine have widespread pharmacological effects, as diuretics, CNS and cardiac stimulants, and smooth muscle relaxants. The actions are attributable to intracellular inhibition of the breakdown of cyclicAMP (by inhibiting the enzyme phosphodiesterase). This results in a relaxation of smooth muscle, similar to that of β -sympathetic stimulation, but it is not mediated via adrenergic receptors. Some patients benefit from this nonspecific inhibition of smooth muscle spasm, and numerous formulations are available.

In the past problems with these drugs could be considerable, and perhaps underrated, just as the clinical benefit, may be overrated. Once again the young and old, and any patient with renal or heart disease, could suffer adverse reactions to the diverse effects of the xanthines. Both *theophylline* and *aminophylline* are poorly tolerated orally, rectally and by injection, and are unpredictably absorbed by the first two routes, so that the monitoring of serum levels in risk patients is sometimes recommended.

Newer substitutes such as *bamifylline* and *diprophylline*, and newer presentations of *theophylline* (microfined, slow release) have improved matters considerably, and

Concluded overleaf

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Clinical pharmacy

Continued from p53

these products are useful additions. The injection of 500mg aminophylline is an important component in the control of status asthmaticus. This is best done as a small volume (100ml) infusion, since a bolus given over 10 minutes is rather painful.

Steroids

In severely resistant asthma, and advanced CB, steroids may be the only way to limit pulmonary inflammation. Sometimes even aerosols are insufficient, and oral prednisolone is needed, with all the problems of steroid therapy referred to in the article on arthropathy (C&D, June 14, p1038). They are best given on alternate days to minimise adrenal suppression. The main problem with aerosols seems to be throat

infection, especially fungal, such as thrush due to local immunosuppression.

Steroids inhibit only the delayed inflammatory response and so are mainly used as long term prophylactics. They may also limit the effects of an acute attack, particularly in aerosol form. In status asthmaticus, where delayed effects are a prominent feature, IV hydrocortisone is very effective. ■

This series is intended as an outline refresher course for busy retail pharmacists and is based on the third-year syllabus taught to undergraduate BPharm students at Chelsea College, University of London, by the above authors. It is not intended to be comprehensive and it is assumed that pharmacists will consult reference texts for more detailed information.

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US NEWS

Package inserts for patients mandatory

From May, manufacturers of cimetidine, clofibrate and propoxyphene, in the USA, will have to provide mandatory patient information in the form of patient package inserts (PPIs). The Food and Drug Administration has laid down guidelines for the PPIs and said that they should be available in pharmacies in six months. Pharmacists must give the patient a leaflet with every new prescription for one of the drugs and also for repeat prescriptions, if the patient asks for one.

This is the first step in the FDA's programme of testing PPIs for ten prescription drugs or classes of drugs over the next three years. The seven other drugs are ampicillins, benzodiazepines, digoxin, mefloquine, thiazides, phenytoin and Bendectin. The FDA will shortly publish guidelines for three other PPIs and, a month after that, for the remaining four. Those inserts will also have to be dispensed six months after the guidelines are issued.

Over the next three years, all ten PPIs will be evaluated by the FDA, along with alternative means for providing patients with information about prescribed drugs. Once that evaluation is completed, the FDA will decide whether to proceed with PPIs for other prescription drugs, or adopt an alternative system. A number of multiple pharmacies and others have indicated their interest in working with the FDA to test other systems.

The guidelines for the three PPIs already published average 800 words. For propoxyphene, the leaflet must include a caution that combining the drug with alcohol or tranquilizers may be dangerous, and a statement that dependence is possible and has occurred in people who have taken larger than recommended doses over a long period.

For clofibrate, the PPI must note a possible risk of gallbladder trouble or tumors after taking the drug. The guideline states that clofibrate is not for everyone with high cholesterol and triglycerides, and should be used only by people who have not responded to weight loss, exercise or other measures prescribed by the doctor. The cimetidine insert guideline tells the patient that it may take several weeks to notice the effects. It advises the patient not to stop taking the drug without a doctor's advice. ■

COUNTRY COUNTER

by a rural pharmacist

Pheasant games

My urban confrères' greatest pleasure in their rural rides is the sight of the pheasant. In the breeding season the cocks with wattles distended, ears erect, intoxicated with their own androgens, could be fair target for the poacher but not my humane friends. Later in the summer the hens and poults may be seen by the verges, mother leading, poults following, at risk from the passing car. Those of us reared in the cities usually drive slowly at such times and give way to the birds, reverence and enjoyment blended in the witnessing of the procreative process of nature.

My apologies for disillusioning you. In the local production of game, two or three parties are involved. The landed gent who pays thousands for stocking his estate in readiness for the shoot, his game-keeper and his rural proletarian neighbour who is concerned with a subtle method of poaching beyond the reach of the law.

Mr Kirkubright-Ross OBE, who bought the manor and 600 acres in the last depression but one, has the estate to the right of the road. The tenth Lord Tillfurrough has 1,000 acres to the left. Our village lies three miles north of Chudleigh-Balderdash up the same highway. Our surtax farmer, the esteemed lord and numerous villagers are all concerned with the purchase of game oils.

You have not heard of this aromatic commodity? The pheasant is irresistibly attracted to the odour of certain volatile oils. Five of these are winners. If I remember my O level maths factorial $5 \text{ or } 5 \times 4 \times 3 \times 2 \times 1 = 120$. There are 120 combinations of these five oils. Most of the formulas are presented to your correspondent on grubby pieces of paper with many surrations, much nose-tapping and enjoining to confidence. The formulas are compounded from five greasy noisome bottles of which aniseed is the foremost and the sacrosanct papers returned with the assurance, "This is yours, I keep no records of your secret—hand me the same paper next year".

Mr Kirkubright-Ross' game-keeper has one formula to keep his own pheasants on his own land. Lord Tillfurrough's game-keeper uses a different permutation to do the same job. The villagers with gardens abutting on the manorial acres are supplied with more of the 120 variants to lure the game to their side of the garden fence. Those who gain most with minimal

outlay are the latter who escape the epithet of "poacher" by taking birds on their own land.

My reward is a fair profit and sometimes a brace of pheasants.

Too old to emigrate?

The pharmacist was very busy, issuing up to 400 dispensed prescriptions a day but she was not harassed. She received the prescription forms, checked the doses and gave them to her assistant on the computer. The patient waited for a few minutes only during which time the pharmacist answered any queries about the prescription and also recommended medicines for minor ailments to others.

I was curious to know how my confrère could cope with such a work load so efficiently.

"You see", she said "we have been computerised for some time now. No, we do not have dispensing doctors here, the idea is unheard of, doctors and pharmacists would consider it most improper and destructive of inter-professional relations. We do not sell films, cosmetics or toilet rolls.

A pharmacy manager in Britain earns £9,000 a year. We do better, earning about £14,000 with a 40-hour week and ample leisure."

Was this a dream of Utopia, you may ask. No, just a chat with a Canadian colleague on a recent visit. Because the pharmacy is under the same roof as the drug store, its function is purely professional, other sales of tights, tapes, records and, universally, tobacco being in their respective departments. Other smaller drug stores may not have the advantage of computerisation or the same prescription volume but are made to a similar plan.

My impression was that the Canadian drug store has advantages over our own, being a combination of the French *pharmacie*, *drogherie*, *parfumerie* and a few other departments thrown in. In such an environment the pharmacist need not be side-tracked into involvement with non-pharmaceutical sales but is available within the same ambit for advice on detergents, disinfectants, allergies deriving from household chemicals, soaps or cosmetics. Canada, though, has few villages as small as mine so I shall keep to my compromise between the British community pharmacist and his French counterpart, I'm too old to emigrate and England is a grand country to return to. ■

IT TACKLES THE TICKLIES



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Pharmacist's letter to a Dutch nephew

"I was recently asked by my young nephew, who is a Dutch pharmacist, about the advisability of investing money in British general practice pharmacy. I wrote to him and the resulting letter may interest other pharmacists and give the PSNC a view of British pharmacy as others might see it," suggests W. Rucker, a Plymouth pharmacist.

Thanks for your recent letter in which you tell me that you are considering an investment in British pharmacy. I have put together a few notes about pharmacy in this country which might be of some help because I think these are the sort of things that you ought to consider before making any investment over here.

- ☐ Any pharmacist from other countries in the EEC does not have the right to practice over here and a superintendent pharmacist would be required for your company at a cost of about £10,000 in total.
- ☐ Pharmacy is very much government controlled as the state is the only customer and dictates prices and fees for dispensing.

Complex payments

- ☐ The system of paying pharmacists is complex and not understood by most pharmacists. Payment for drugs and fees is only paid after a delay of about two months. A system of discounting the net cost price of drugs exists for the pharmacies doing above average numbers of prescriptions.
- ☐ Government legislation in the time of the last Socialist Government brought a great deal of employee protection with many extra taxes on the employer. This would add about 25 per cent to the cost of the basic wages payable. The jungle of PAYE, graduated pension schemes, national insurance, redundancy payments and recently, sickness benefits payable by employers, takes some understanding.
- ☐ Dispensing has to be quick and frequent to make the shop pay its way. An average dispensary will do about 150 prescriptions per day with one dispenser to help the pharmacist. There is complete pharmacist

responsibility as the pharmacist must take responsibility for all dispensing and counter sales. It is expected that he will be on the premises at all times. All dispensing and sales of medicines must cease if he leaves the shop. This does not apply in Holland and other EEC countries.

- ☐ Profit from the dispensing and medicine sales needs to be boosted by sales of other merchandise and a big stock investment should be considered. Sales of home medicines are restricted and many drugs available in pharmacies in Europe are "prescription only" in Britain.
- ☐ There is a great deal of control of our premises by bodies outside the profession. We have regular inspections from the Home Office, the police, the weights and measures department as well as local inspectors for fire protection, wages and employment protection, health and safety protection etc.
- ☐ Britain's economy is suffering great inflation and this is reflected in the extra cost of keeping the same amount of stock on the shelves each year. A good to average pharmacy might have £25,000 worth of stock. With inflation at 20 per cent, this means the same stock will cost over £30,000 next year and this must be paid for out of taxed profits.

High borrowing costs

- ☐ The cost of borrowing money to finance business is currently running at around 20 per cent. The minimum lending rate by the banks is 16 per cent (when written) and it is usual for them to charge 3 or 4 per cent over MLR. Higher than anywhere in Europe.
- ☐ Many pharmacies of a decent size

are being bought by large multi-national companies and it is rare for decent pharmacies to come onto the market. However modest businesses with a turnover of £150,000 would sell for about £30,000 plus stock at value.

- ☐ Hours of service for all pharmacies are 9 am to 5.30 pm with each shop in the town taking turns to do an extra hours late duty.
- ☐ There is no limitation of pharmacy contracts. Any pharmacist can open up on your doorstep and take your trade. We are also vulnerable to the migration of population and the increasing trend for doctors to move into large clinics and group practices.
- ☐ Should the Socialists gain power again, then it is their intention at some time to nationalise the pharmaceutical industry.
- ☐ Corporation tax is at a level of 42 per cent with income tax being anything from 30 per cent to 60 per cent.
- ☐ Capital gains tax on any increase in value in business assets is taxed at 30 per cent although anyone who is non-resident would be able to escape this with careful planning.

Limited oil wealth

- ☐ Finally, I would ask you to remember that you would be investing in a strong currency which does not seem to have a good industrial base and is strong only on its limited oil wealth. If you contrast this with say the USA where interest rates are lower, profits are respectable and not a dirty word, and the dollar is at a low ebb, I feel sure you would do far better to consider another country for your investment. I also feel that in the near future we may have to reconsider currency controls and your money may be hard to take out without a loss due to the dollar premium for investment currency. ■

Not enough jobs for future pharmacists

Concern about unemployment among pharmacists was raised at the December Council meeting of the Pharmaceutical Society of Northern Ireland.

The secretary said that 25 students had registered during 1980 and Mr O'Rourke then said that some students who now completed the period of practical training and registered as pharmaceutical chemists would not be able to find employment in Northern Ireland. The Ulster Chemists' Association kept a list of pharmacists seeking employment and in the past those who were unemployed had been directed to positions. Recently no vacancies had been found for the four or five pharmacists seeking full-time employment.

The matter should be looked at on a UK basis, he said, as some students resident in Northern Ireland elected to attend a university or school of pharmacy in Great Britain thus augmenting the number of graduates coming out of the Queen's University of Belfast. The number of names on the Register of Pharmaceutical Chemists had increased over the past two years while the number of registered premises had fallen.

Return to sixties

He did not wish to see a return to the situation that existed in the mid 60's when unemployed pharmacists opened pharmacies in an effort to earn a living. It should be remembered that the Society's request for the introduction of some control on the geographical siting of pharmacies had been rejected, he pointed out.

■ The president, Miss M. J. Watson, gave a warm welcome to Mr Derek Corbett who was attending his first meeting and said that he had shown his ability in other fields and that she was confident he would prove a valuable member.

■ A letter from the clerk to the Society's Statutory Committee was read informing the Council that the chairman had considered three certificates of conviction or order. Those were in respect of a member of the Society who had pleaded guilty to

charges of selling and exposing for sale medicinal products at premises which were not a registered pharmacy contrary to sections 52 and 67 (2) of the Medicines Act 1968. The chairman had given careful consideration to the seriousness of the offences and to the only penalty the committee can impose. He had then decided that he would deal with the matter himself by issuing a severe warning to the member concerned and informing him that should his name come before the committee again, then the present offence would be taken into consideration.

Management course

■ The secretary said that an official of the Northern Ireland Staffs Council for the Health and Welfare Services had contacted him about a suitable date on which to hold the management course for students. The most convenient dates were April 13-15. The course would be residential and all meals supplied.

It was agreed to hold the course on these dates and the secretary said he would send a circular to each student concerned giving prior notice of the date of the course and asking whether accommodation would be required. Mr Kerr said that the course in April 1980 had been most successful but mention was made at the time of the desirability of extending it. He suggested that some discussion should be held with the director of the Staffs Council on the course content.

■ Mr Napier reported on a meeting of the Lurgan, Portadown and Armagh Branch held at the Brownlow Health Centre on November 20 when Mr McMillan, a representative of Smith and Nephew, gave an interesting talk on "Contact lens solutions". There had been a good attendance and a useful discussion followed the talk. The members were grateful to Northern Pharmacies Limited for providing supper. He had been asked to convey the congratulations of the Branch to Miss Watson on her election.

■ The application of Brendan Anglin, 24 Ashley Gardens, Belfast, for registration as a student was granted. ■

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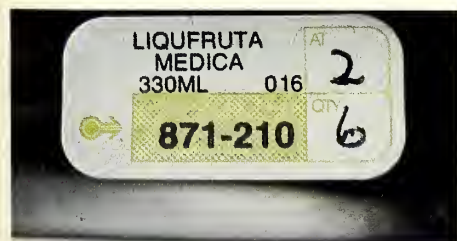


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G H Furness Ltd, 11 Devent St, Newcastle-on-Tyne
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J N D. Graw, 65 Henderson St, Bridge of Allan
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David Greenwood, 11 Market Place, Glastonbury
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Colin Hall, Rammoor Pharmacy, 382 Fulwood Rd, Sheffield
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H Hall, Esq, 62 High St, Hampton Hill
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Halls Chemists, 143 High St, Battersea
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M Heald, 52 High St, Storbury
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Importance of personnel and presentation

Fifth in a series by Graham Walker, BPharm, MPS, AMBIM

There is a vastly overworked adage in the world of retailing that goods will sell if they are "in the right place, at the right time and at the right price". While much of this is commonsense, I think we ought to add "by the right personnel". The object of this exercise is to indicate some of my ideas on presentation and personnel.

Let's start with personnel since this is the area that can make or break a cosmetic and perfumery business. First of all, cosmetic personnel must look the part, no sensible consumer is going to part readily with spending power on cosmetics or fragrance if they are faced with a spotty, untidy, overweight assistant wearing an overall bulging at the seams. The consumer is buying her cosmetics or perfumery to make herself look more attractive and feel more exciting: she is going to be completely turned off by

tatty assistants. So, select attractive staff, make sure they keep themselves attractive and see that you provide them with suitable attractive clothing.

No dolly birds

But it is no use having a row of dolly birds who neither have product knowledge nor the first idea on how to sell the products, so training is necessary. I can't emphasise too strongly that you should ensure the manufacturers do the training for you.

The periods vary depending on the type of outlet you are managing. If cosmetics are a fringe activity, then a one-day course is appropriate and should not be difficult to arrange. If, however, you are heavily involved in cosmetics, as I am, then you must be prepared to spend up to £250 in expenses in sending your carefully-

selected staff on a full week's course along with the consultants from Debenhams and the House of Fraser.

I firmly believe that it is worthwhile having your strongest account represented by a fully-store-trained consultant. Not only does this enable you to offer your customers a vastly improved service, but with a bit of arm twisting will probably bring uniform, grooming allowances and commission for your consultant.

Own 'territory'

One of the most difficult features for pharmacists to accept is that their newly-trained consultant will not want to move far away from her merchandise, even though her presence is needed in other parts of the pharmacy. But you cannot have it both ways! Do you want your expensively-trained consultant to miss a £40 sale because she is selling a 10p rainhood? At the same time you must not let her be seen to be doing nothing—dusting twice a day is a good remedy for apparent laziness.

You should of course give your cosmetic staff a fair degree of authority and responsibility. Make it their job to complete the stock records, and prepare orders for your signature. Let them be the first to see the cosmetic reps and suggest orders for your signature.

My own policy is that under *no circumstances* is a representative given an order by my staff unless I have previously approved it. Any deviation from this rule could lead to instant dismissal. But for goodness sake make your girls feel important—short of the final authority to spend your money because that can spell disaster. Over the years I have seen unscrupulous, amorous reps create havoc in the married lives of female buyers just to get an order. Indeed, some of the stories would be more appropriate to *Mayfair* than *Chemist & Druggist*!

Sign posting

Since I seem to be deviating, I'd better move on to the second part of this article, namely presentation. If we cannot present our merchandise as well as our competitors then we will fail—it is as simple as that. So where do we start?

1. We identify which part of our floor area we are going to devote to cosmetics and perfumery and by

suitable "sign posting" let the customers know where it is.

2. We then decide upon a fixture layout bearing in mind that counters rather than gondolas should predominate, since we have already established earlier in this series that the independent's strength lies in personal service. So cut out the gondolas wherever possible. Don't try to cut corners on cost, after all you can't expect customers to buy luxury merchandise from tatty counters. Also you will get 100 per cent capital allowances against tax in the first year. So really set out to show by fixtures that you really mean business. This will not only impress your customers but also your cosmetics suppliers.

Throw out stands

3. Having got your fixtures right, your next problem is to arrange the stock in the space available. I have an aversion to manufacturers stands cluttering up the pharmacy, so try and get rid of as many of these as possible. (If only Rimmel would reduce their range so that we could get rid of the turquoise monster; that would make a clean sweep and make my pharmacy look much more attractive.)

Keep all your French perfumery

together, preferably in wall cabinets for security reasons; each fragrance should be accompanied by a fresh tester. Ideally the counters should be clad inside and out by the display departments of the agencies you hold. They should also provide suitable merchandisers for use on the counters. Incidentally if anyone knows where I can buy some "cubes" made of glass, about 18 inches square and 2ft high for use on island counters (as at Debenhams) I would be delighted to know.

Having established the counters, you must insist that they are dusted each morning.

To conclude this article, which seems to me to be a cheeky attempt to tell grandmothers how to suck eggs, may I emphasise one point which I failed to mention earlier—that is, cosmetics staff must be paid commission on all their sales. I don't mind where it comes from (you, the rep or the company) but it must be available. Without commission I doubt if any account will achieve more than 75 per cent of its potential.

The next and final article in this series will be entitled "Where do we go from here?" But I hope to write my end-of-year review first—look out French perfumiers, the gun for 1980 is pointing in your direction!

COMING EVENTS

FIP programme

The provisional programme for this year's congress of the Federation Internationale Pharmaceutique (FIP) includes symposia on anti-cancer therapy, advances in pharmacokinetics, drug delivery, pharmaceutical technology, analysis of drugs and metabolites, gene manipulation and drug stability.

Topics for the sectional programme include patient education, biopharmaceutics and hospital drug use, and the application of computers to general practice pharmacy. The congress will be held in Vienna, Austria, September 7-11. Details from FIP Congress 1981, Alexanderstraat 11, 2514 JL The Hague, The Netherlands. ■

Monday, January 12

Ayrshire Branch, Pharmaceutical Society, Savoy Park Hotel, Ayr, at 8 pm. Talk by the public relations officer, Glasgow Stock Exchange.

Epsom Branch, Pharmaceutical Society, Bradbury Centre, Epsom District Hospital, at 8 pm. Dr G. H. J. Robb, consultant physician, Epsom District Hospital, on "Current therapy in diabetes".

Plymouth Branch, Pharmaceutical Society, Greenbank Hospital medical centre lecture theatre at 8 pm. Mr John Pope on "Weather".

Stockport Branch, Pharmaceutical Society, Alma Lodge Hotel, Stockport, at 8 pm. Cheese and wine evening and talk on "Pharmaceutical antiques".

Tuesday, January 13

Galen Group, Friends' Meeting House, Park Lane, Croydon, at 8 pm. Mrs Jean Thorpe on "Heathfield".

Leicestershire Branch, Pharmaceutical Society and Leicester and Leicestershire Branch, National Pharmaceutical Association, Leicester Royal Infirmary postgraduate medical centre, at 8 pm. Mr W. A. G. Kneale, EEC Liaison secretary, NPA, on "Pharmacy in Europe".

Northumbrian Branch, Pharmaceutical Society, Vicomte Suite, Imperial Hotel, Jesmond Road, Newcastle, at 8 pm. Mr R. C. B. Johnstone, Forestry Commission, on "Forestry in Northumberland".

South East Metropolitan Branch, Pharmaceutical Society, Lewisham Hospital medical centre, High Street, London SE13, at 8 pm. Dr Colin Lazarus, principal pharmacist, Guy's Hospital, on "Radiopharmaceuticals".

South West Metropolitan Branch, Pharmaceutical Society, St Thomas' Hospital postgraduate lecture theatre, London SE1, at 8 pm. Speaker from Bencard on "Allergies".

Stirling and Central Scottish Branch, Pharmaceutical Society, Station Hotel, Stirling, at 8 pm. Dr S. Reith, Stirling Royal Infirmary, on "Diabetes, its management and treatment".

Wednesday, January 14

Edinburgh and Lothians Branch, Pharmaceutical Society, 36 York Place, Edinburgh, at 7.45 pm. Mr David Sharpe, president, PSGB, on "Clinical pharmacy and general practice".

Isle of Wight Branch, Pharmaceutical Society, St Mary's Hospital postgraduate medical centre, at 8 pm. Mr R. K. Pilsbury on "Moths and butterflies".

Reading Branch, Pharmaceutical Society, Guide Dogs for the Blind Association, Wokingham Training Centre, at 3.30 pm. Talk, film and tour of centre.

Scottish Department, Pharmaceutical Society, Meeting postponed to January 21.

Thursday, January 15

Birmingham Branch, Pharmaceutical Society, University of Aston senior common room (seventh floor), at 8 pm. Dr D. Bailey, Welsh School of Pharmacy, on "The drug alcohol".

Dundee & Eastern Scottish Branch, Pharmaceutical Society, Ninewells Medical School lecture theatre 3, at 7.30 pm. Dr D. Doyle, medical director, St Columbia's Hospice, on "Control of pain in the dying patient".

Lancaster and Morecambe Branch, Pharmaceutical Society, Medical Centre, Ashton Road, Lancaster, at 7.45 pm. Mr C. C. Stevens, on "New and proposed legislation".

North Staffordshire Branch, National Pharmaceutical Association, North Staffordshire Medical Institute, Hartshill Road, Stoke-on-Trent at 8 pm. Mr E. J. Downing, assistant secretary, NPA, on "Computers in pharmacy".

Friday, January 16

Crawley, Horsham & Reigate Branch, Pharmaceutical Society, Queen Victoria Hospital, East Grinstead, at 8.30 pm. Dr D. S. J. Maw on "Recent developments in the treatment of diabetes".

Advance Information

South East Region postgraduate lectures, Sussex postgraduate medical centre, Brighton General Hospital, Elm Grove, Brighton on February 4, and March 4 at 8 pm. Topics are: "The non-drug treatment of depression" and "The drug treatment of depression".

Round table discussion on "Good manufacturing practices in the cosmetic industry", Holiday Inn, Zurich Airport, on February 19. The conference is organised by the pharma/cosmetic section of the European Organisation for Quality Control. Further information from SAQ secretariat, PO Box 2613, CH-3001 Berne.

Postgraduate school on "The theory and practice of solid dosage form manufacture", School of Pharmacy, University of London, Brunswick Square, London WC1, from March 30 to April 3. Application forms from Mr R. E. Marshall, School Secretary, Department of Pharmaceutical Sciences, Pharmaceutical Society, 1 Lambeth High Street, London SE1 7JN.

Chelsea Pharmacy Students Association, Annual Dinner Dance, on Saturday, January 31, London Penta Hotel. Tickets £9 to include meal and disco, from A. R. Baker (CPSA publicity officer), Pharmacy Department, Chelsea College, Mannes Road, London SW3 6LX.

HEALTH CENTRE NEWS

■ **Wickersley health centre**, near Rotherham, is nearing completion and will open in the Spring. It will accommodate nine GP's in four practices and the Health Authority services now domiciled at the Sycamore Avenue Clinic. It has cost £304,000.

■ **Yorkshire RHA** is to buy a small piece of land from Bradford Metropolitan Council for extensions to the Barkerend Road, Bradford health centre.

■ **Mersey RHA** is seeking approval for a health centre at Hedgefield Road/Childwall Valley Hall Road, Liverpool.

■ **Lothian Health Board** is seeking approval for a health centre and a geriatric day hospital at Whitburn, West Lothian, Scotland.

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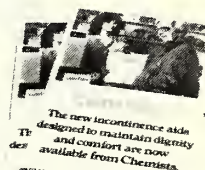
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FAMEL

Expectorant, Original and Linctus.



Consumer spending set to fall in short term

The recession is likely to bottom out in mid-1981, but the year will also see unemployment at the two million plus level—excluding school leavers—with wage increases “significantly above” the six per cent norm set for local authority workers, says the latest *Retail Business*.

In total they expect consumer spending to fall by some 0.75 per cent in 1981—durable goods not showing a true recovery until 1983-4, with a growth rate to 1985 less than the average recorded over the past 10 years. Like durables, the main component for growth in non-durables is expected in 1983-4, but growth to 1985 should be a little greater than the recorded historical average.

Inflation is projected to be only just in single figures by 1985. *Retail Business* No 275, January 1981 (single copies £20, subscription £139), EIU Ltd, Spencer House, 27 St James's Place, London SW1A 1NT. ■

... and more gloom

Further gloom was expressed last week by Manpower Ltd, the work contractors, whose latest survey predicts that employment prospects in retailing will be more depressed in the first three months of 1981 than at any time in the present recession.

More than two thirds of retailing employers also forecast no improvement in job prospects in their sector for at least 12 months and the largest proportion expect that recovery will be delayed beyond 12 months.

Manpower say that these findings confirm that the present low point in retailing job prospects may persist “well into 1982”, with many more employers continuing to plan still further cuts in their labour force than are planning staff increases. ■

Guide to safety

A new guide to the 1974 Health and Safety at Work Act has been published by the Health and Safety Commission. The booklet relates to the Act as amended up to October 31, 1980, and although not an authoritative statement of the law, it represents

the HSC's guidance on practical application of the Act. In the course of the text the reader is referred to the precise wording of the appropriate provision of the Act and/or regulations. “A Guide to the HSW Act” (HS(R)6), (£2.75 plus postage) is available from HMSO. ■

Cost of insolvency increases

A number of changes and increases in fees in bankruptcies and companies winding-up came into force on January 1. New Fees Orders will replace the Bankruptcy Fees Order 1975 and Companies (Department of Trade) Fees Order 1975, both of which have been extensively amended since they were made.

Increases in some fees, particularly those payable where a trustee or liquidator submits his accounts for audit, have been made with the object of meeting the increased costs of running the Department's Insolvency Service. At the same time, certain small and uneconomic fees are abolished and amendments to the wording of fees have been made with the object of simplifying them.

The orders are the Bankruptcy Fees Order 1980, SI 1980 No 2007, and the Companies (Department of Trade) Fees Order 1980, SI 1980 No 2008.

ICI overtime ban negated by slump

ICI say that they are not over concerned by a threatened overtime ban by manual workers at their plants which is due to start on January 19.

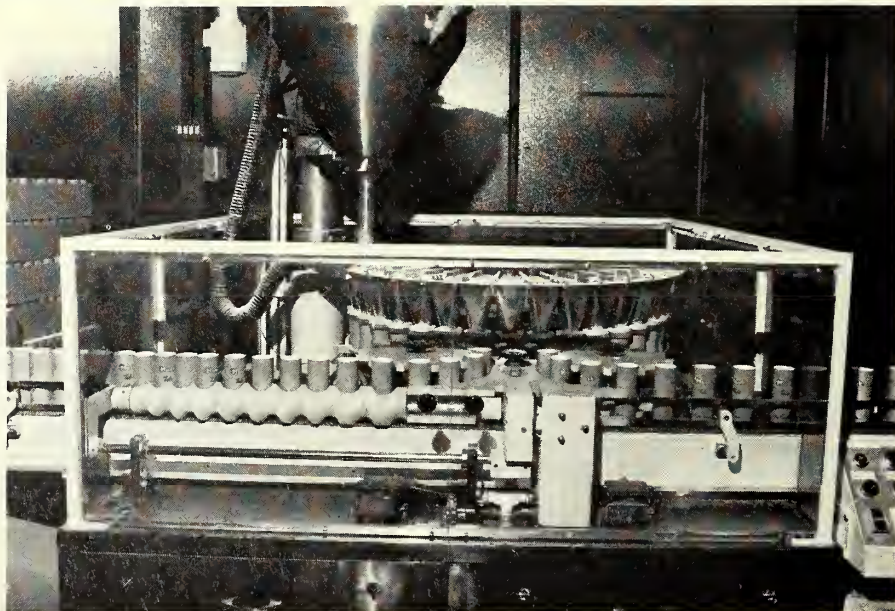
The ban has been called because of plans to cut back the workforce by 6,000—the fibres division being the hardest hit—but ICI believe it will have little effect on the company as the recession has already reduced overtime working to a minimum.

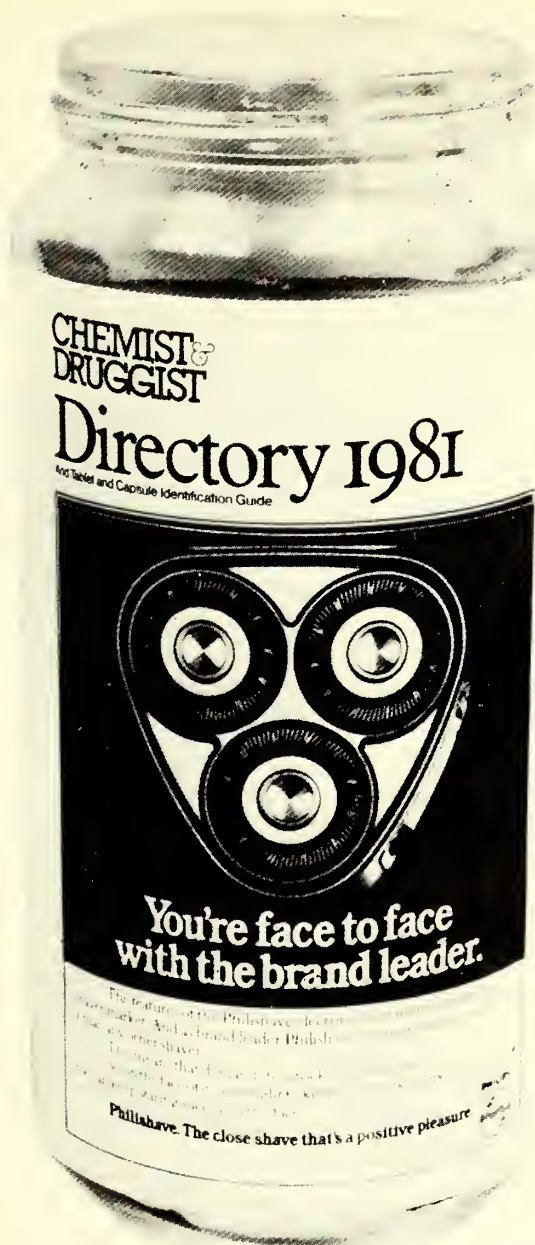
Seven unions representing 44,000 manual workers have agreed to back the ban, but ICI say that considering the state of the economy they are surprised that the unions feel this threatened move is necessary or helpful to their members. They also point out that not all of the job reductions are compulsory as early retirements and voluntary redundancies are included in the cut-backs.

□ A cost cutting exercise at the administrative level has also been announced by the company. Headquarter costs are to be cut by up to 25 per cent over the next three years, and this will include workforce reductions through natural wastage, retirements and redeployment. Earlier this year ICI announced their first ever pre-tax loss of £10m for the July-September period. ■

More Business News on p70

A high speed talc-filling installation—four containers a second—incorporating continuous flow, rather than the conventional stop-start technique, has been developed by the Alite division of Neumo-Alite Ltd. The installation is based upon the Alite System 600 continuous rotary machine and is pictured at the Clwyd factory of contract packaging specialists Marcus Ellis (Cosmetics) Ltd





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UG confident for year ahead

The glass container market in pharmaceuticals is set to decline slightly in 1981, say United Glass "but will nevertheless remain very important to UGC and other glass manufacturers." Despite the recession at home, overseas demand for smallware has been very strong, they say: "... reflecting Britain's strength in pharmaceutical products".

UG are looking for growth areas in 1981 and will be adopting an "aggressive" stance. One such growth area, they believe, is babyfoods. Now that Australia has switched to glass, Britain and Canada are the only remaining countries relying so heavily on cans: "We are told that this latest change came about because mothers have such a strong feeling for the hygiene and purity of glass and that the packaging of babyfood in glass has the right association for the caring Mum".

An expansion programme that is already underway is the investment of £1 million in a second Plastishield sleeving line—producing a lightweight bottle shrink-wrapped in a pre-printed

plastic sleeve. This will provide the main back-up for the new Plastishield singles— $\frac{1}{4}$ and $\frac{1}{2}$ litre sizes. The original 1 litre size is largely aimed at soft drinks but UG hope the singles will allow them to assault the general drink and food market.

During 1980 UG incurred £2.5 million in redundancy and employment termination costs following the closing of machines, but they believe that there are "better indications" for 1981. Last year saw a concentration of adverse factors for the packaging market with the effects of very bad summer weather combining with the general recession.

This year, they see an end to de-stocking and signs that the recession in the US will bottom out. Moreover, they expect the basic raw material costs for glass to remain favourable and are looking for "considerable development" in their own manufacturing process. ■

Southall reorganise

Southall Photographics, part of the Sangers group, are changing their name to Sangers Photographics as part of the group's corporate changes announced in May of last year.

The change takes place on January 12 and is accompanied by a move to combined offices and

warehouses on the Hockley Industrial Estate. The reorganisation also sees the establishment of a marketing department and "strengthened sales organisation".

Southall say they are planning several more innovations for 1981, including the introduction of new products and alterations to service and delivery. From January 12 they will be at: Priory House, Hockley Industrial Estate, Pitsford Street, Birmingham B18 6LK. ■

Advertising for staff—EOC guide

A new guidance on advertising, which deals mainly with recruitment, has been produced by the Equal Opportunities Commission.

This supersedes the EOC's earlier "Guidance on Employment Advertising Practice", and includes certain additional points not covered in the first guidance. It also includes for the first time information about the implications of the Sex Discrimination Act for the advertising of goods, facilities, services and premises.

Copies of "The Sex Discrimination Act and Advertising" are available free from the EOC publicity section at: Overseas House, Quay Street, Manchester M3 3HN. ■

Aero and Glymiel have moved!

These two well known products are now part of the Strenol range and are being distributed for Strenol by Farillon Ltd., Bryant Avenue, Romford, Essex RM3 0PJ (Telephone: Ingrebourne 71136).



Aero Dry Shampoo will continue to be distributed in Northern Ireland through Castlereagh Agencies Ltd.

Aero Shampoo and Glymiel Gel will be available from your usual wholesalers, and for further information please contact Farillon Ltd.

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offers in the near future*

Strenol Products Ltd.

Strenol Products Ltd., London NW11 7TH

Briefly

■ **Arbrook Ltd** are to merge with another member of the Johnson & Johnson group of companies and will be known as Surgikos Ltd. The company address will be unchanged.

■ **Vick International** have moved their research and development laboratories to Rusham Park, Whitehall Lane, Egham, Surrey TW20 9NW. Telephone Egham 34422; Telex LABVICK 935669.

APPOINTMENTS

■ **Fisons Ltd:** Sir Eric Scowen joins the pharmaceutical division as an external consultant. Sir Eric retired in June 1980 as chairman of the Committee on Safety of Medicines.

■ **United Drug Ltd:** Mr J. F. Butler, MPSI, has been appointed to the board. He joined the company in May 1980 and they say he has brought considerable knowledge of pharmaceutical wholesaling—under his guidance business has “substantially improved” in Limerick and Mr Butler has also made a contribution to the policy of United Drug overall.

■ **Charnwood Pharmaceuticals Ltd:** Mr Graham Wall has been appointed managing director. Charnwood were acquired by Fisons in June last year. After qualifying as an accountant, Mr Wall joined Fisons Overseas Ltd and spent four years in Bermuda. He joined the pharmaceutical division in Loughborough in 1973, spending the last 12 months as corporate development manager.

■ **Polaroid (UK) Ltd** have reorganised their consumer photographic management structure. Tim How, previously product manager, is promoted to marketing manager. Maggie Hebden who has been the consumer representative for the northern Home Counties is promoted to special markets. Stuart Barnard and Derek Binns have been promoted from business and professional product representatives to key accounts supervisors in the consumer division. Charlotte Robinson is the new sales office manager.

MARKET NEWS

Vitamins lower

London, January 6: In the few days that have elapsed since the end of the Christmas and New Year holidays the markets have not had time to resume anything like a state of normality.

As previously, the beginning of the New Year has seen the introduction of new price schedules for a number of pharmaceutical chemicals. All the vitamin's supplied by a principal manufacturer have been reduced—some items by a considerable amount.

Glycerin also shares a substantial fall from previous levels; 5-metric ton lots of chemically pure are £120 ton down. From January 5 vacuum-dried sodium chloride has risen by a little over £3 metric ton in 10-ton lots.

Honey from Mexico and Argentina is dearer by small amounts while Australian is slightly easier. Among botanicals Peru balsam and gentian root were dearer. Matto Grosso ipecacuanha was quoted at £20 kg cif against £17.20 in the previous week while Costa Rican returned to the market at £25 kg, cif, after an absence of several weeks.

For unexplained reasons Brazilian peppermint was advanced by 30p kg at origin but spot offers only rose by 10p. Ceylon citronella and cinnamon leaf oils were dearer while palmarosa was lower.

Pharmaceutical chemicals

Ascorbic acid: (per kg) 100-kg £5; 500-kg from £4.60 as to source.
Benzocaine: BP in 50-kg lots, £6.63 kg.
Biotin: Crystals £5.67 per kg; in 10-kg lots.
Bromides: Ammonium, potassium, sodium, per metric ton in 50-kg lots £970; 250-kg lots £920; 1,000-kg £890.
Brucine sulphate: £45 kg.
Calcium pantothenate: £7.53 kg in 25-kg lots.
Clioquinol: NF XIV 500-kg lots £15.81 kg.
Cyanocobalamin: per g £2.53 in 100-g lots; imported £2.40 in 1-kg lots.
Dexpanthenol: (Per kg) £10.45 in 5-kg lots.
Dextramethorphan: £145.20 in 5-kg lots.
Dihydrocodeine bitartrate: £535 kg in 20-kg lots; Subject to Misuse of Drugs Regulations.
Glycerin: In 250-kg returnable drums £670 metric ton in 5-ton lots; £695 in 2-ton lots.
Methyl salicylate: 5-ton £1.61 kg; 1-ton £1.65.
Metol Photo grade per kg, 50-kg lots £9.45.
Nicotinamide: £3.46 kg in 50-kg lots.
Nicotinic acid: £3.57 kg in 50-kg lots.
Noscaphine: Alkaloid: £33 kg for 100-kg; hydrochloride £36.30.
Opates: (£ per kg) in 1-kg lots; subject to Misuse of Drugs Regulations—Codeine alkaloid £600-£604

as to maker; hydrochloride £520; Phosphate £460.50-£462; sulphate £520. Diamorphine alkaloid £821; hydrochloride £748. Ethylmorphine hydrochloride £585.50-£591. Morphine alkaloid £667-£668; hydrochloride and sulphate £544-£545.
Oxalic acid: Recrystallised £1.39 kg for 50-kg lots.
Paraffin liquid: BP £0.642 litre in 210-litre drums; light BPC 1963 £0.569; Technical white oil WA23 £0.557; WA21 £0.586.
Pyridoxine: £20 kg for 20-kg lots.
Riboflavin: (Per kg) £24.75 in 10-kg packs, diphosphate sodium £77 in 5-kg.
Sodium ascorbate: 100-kg lots £5 per kg.
Sodium chloride: Vacuum dried in 10-ton lots delivered London 4-ply bags £47.56 metric ton.
Talc: BPC sterilised £646 metric ton in 50-kg; £388 for 1,000-kg lots.
Tartaric acid: £1,795 per metric ton.
Thiamine: Hydrochloride/mononitrate £16.20 kg in 25-kg lots of British origin; 500-kg £14.97.
Tocopherol: DL-alpha 5 kg £15.95 kg.
Tocopheryl acetate: DL-alpha per kg £13.20 (in 20-kg lots); adsorbate £12.20 (25-kg).
Vitamin A: (per kg) acetate powder 1/2 miu per g tablet grade £16.09 (5 kg lots); palmitate oily concentrate 1 miu per g £15.75 (kg-kg); water miscible £4.45 litre (6-litre pack).
Vitamin D2: Type 850 £46.20 kg.
Vitamin E: See tocopheryl acetate.
Vitamin K: 100-g lots £1.10 per g.
Zinc acetate: Pure £1.31 kg in 50-kg lots.
Zinc carbonate: Pharmaceutical grade £720 per metric ton.

Crude drugs

Balsams (kg) Canada: Unchanged at £11.90 on the spot; shipment, £11.80, cif. Copaiba: unquoted Spot and cif. Peru £9.90 spot; £9.65, cif. Tolu £6.15 spot.
Belladonna: (kg cif) herb £1.99; leaves £2.24; root, £1.94 spot; £1.80, cif.
Benzoin: £189, cwt, cif.
Cardamoms: Alleppy green £4.75 kg, cif.
Cascara: £1.205 metric ton spot; £1.145, cif.
Cherry bark: Spot £1.185 metric ton; shipment £1.145, cif.
Dandelion: Spot £2.060 metric ton spot; £1.980, cif. Argentinian (white) £700.
Gentian root: £2.655 metric ton spot; £2.595 cif.
Honey: (per metric ton in 6-cwt drums ex warehouse). Australian light and medium ambers £690-£720 Canadian £750 Mexican £650.
Hydrastis: Spot £29.60 lb; £28.75, cif.
Ipecacuanha: Matto Grosso £20 kg, cif; Costa Rican £25, cif.
Menthol: (kg) Brazilian £5.20 spot and cif. Chinese £4.60 spot; £4.40, cif.
Nutmeg: (per metric ton fob) Grenada 80s \$3,200 sound unassorted \$2,950 110s \$3,050, defectives \$2,000.
Seeds: (metric ton, cif). Anise: China unquoted for shipment. Celery: Indian £350. Coriander: Moroccan £180. Cummin: Indian £740. Fennel: Indian £450. Fenugreek: Moroccan £275; Indian £285.

Essential oils

Bergamot: From £48 kg spot nominal.
Buchu: South African £115 per kg spot; English—distilled £180.
Cinnamon: Ceylon leaf £2.65 kg spot; £2.57, cif. bark: English-distilled, £155.
Citronella: Ceylon £3.50 kg spot; £3.25, cif.
Chinese £3.10 spot; £3, cif.
Ginger: Chinese £21 kg spot nominal; £18.75, cif. English-distilled (ex W. African root) £80; (Indian £43).
Nutmeg: East Indian £7.50 kg spot; £6.60, cif. English distilled £15.
Palmarosa: £12.50 kg spot; £11.30, cif.
Patchouli: Indonesian £13.60 spot; £12.50, cif.
Peppermint: (kg) Arvensis—Brazilian £4.60 spot; £4.80, cif. Chinese £3 spot; £2.86, cif. American niperata £8.95, cif.
Rosemary: Moroccan £6.80 kg spot; Spanish £7.50.
Spearmint: Chinese £7 kg spot; £6.80, cif. American £9.50, cif. spot.
Thyme: Red £45-50% £18 kg spot; nominal.
Vetiver: Java £11 kg spot; £10.37, cif.

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Business for sale

**X1—CENTRAL LANCA-
SHIRE**—Main road Pharmacy
close to the centre of a character full
town, dispensing approximately
1,600 scripts per month. Turnover
to 31st May 1980 £68,798.
Freehold property for sale at
£12,000 although a lease would be
considered. Stock at valuation
approximately £10,000. Offers
invited for goodwill and fixtures.

**X2—CHESHIRE/LANCASHIRE
BORDER**—This high street Pharmacy
offers considerable scope for
improvement by an energetic
owner. Scripts average 1,500 per
month. Turnover over £80,000 per
annum. Freehold property for sale
at £17,000. Goodwill and fixtures
£3,500. Stock at valuation approx-
imately £12,500. The present
owner is retiring.

**X3—SOUTH MANCHES-
TER**—Drug store opportunity.
Busy main road position. Average
weekly cash sales £2,000, rent
£2,500 per annum, goodwill and fix-
tures £32,000 o.n.o. Stock at valua-
tion.

X4—SHEFFIELD—retirement
vacancy. Turnover approximately
£60,000, improving faster than
inflation rate, good profits, prem-
ises held on lease, easily and
economically run. Price £1,500 for
goodwill and fixtures, plus stock
estimated at £15,000.

X5—CLEVELAND—All round
pharmacy in densely populated area
turnover £95,000 1,200 scripts per
month £8,000 for goodwill, fixtures
and fittings plus stock at valuation.

**X6—IDEAL SEMI RETIRE-
MENT VACANCY**—within easy
reach of the Lake District. Property
with living accommodation, three
bedrooms and garden, turnover
currently approximately £70,000.
Dispenses 1,200 scripts per month,
beautifully situated Freehold prop-
erty £32,000 goodwill + Fixtures
£2,000 stock approximately
£9,000.

**X7—HUMBERSIDE COASTAL
RESORT**—This main road phar-
macy has the benefit of a settled
population and seasonal trade.
Turn-over is some £160,000 per
annum with approximately 3,500
scripts per month. The premises are
offered on lease with an initial rent
of £40 per week, plus £20 per week
for the living accommodation if
required. Goodwill and fixtures
£42,500 plus stock at valuation
approximately £25,000.

X8—CLEVELAND—village
pharmacy in large premises with
extensive living accommodation
which can be separately let if
required. Turnover to April 1980
£120,000 with some 2,700 scripts
per month. Property for sale at
£45,200; fixtures £6,000; goodwill
£12,500; stock at valuation approx-
imately £18,000.

 **Ernest J. George**
8 CO
GARDALE HOUSE, 122 GATLEY ROAD, GATLEY, CHEADLE,
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KITS** range of cosmetic bags and accessories throughout
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Offering comprehensive range of pharmaceutical products for
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	Ex London Warehouse
a. Chloroquine Syrup 60ml (cartoned)	£2.40 per doz
Chloroquine Syrup 2 litres	£2.92 per doz
b. Paracetamol Syrup 60ml (cartoned)	£2.20 per doz
Paracetamol Syrup 2 litres	£2.64 per 2 litre
c. Tetracycline Syrup 60ml (cartoned)	£2.56 per doz
Tetracycline Syrup 1 litre	£2.28 per 1 litre
d. Chloramphenicol Syrup 60ml (cartoned)	£3.28 per doz
Chloramphenicol Syrup 1 litre	£2.24 per 1 litre
e. Ampicillin Granules 60ml (cartoned)	
125mg/5ml	£3.44 per doz
f. Tetracycline Capsules 250mg 16s	
(Red/Yellow) Blister Pack	£3.60 per doz
Tetracycline Capsules 250mg 1000	£6.00 per 1000
g. Ampicillin Capsules 250mg 16s	
(Black/Red) Blister Pack	£5.48 per doz
Ampicillin Capsules 250mg 1000	£16.00 per 1000
h. Chloramphenicol Capsules 1000	
(White/White)	£7.50 per 1000
i. Dr. Bonjeans Pills 30	£4.25 per doz
j. Letap Syrup of Haemoglobin with	
Vitamin B12	£6.00 per doz
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Letalin Cough mixture 2 litres	£2.04 per 2 litres

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Telex: 896248 PRAJAY G.**

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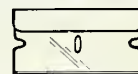
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and post.



Retractable blade holder
with 10 blades £1 each incl.
Cheque with order please
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National Press advertising campaign is
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stocks of 50gm shakers and popular
250g refills. Available from most
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Milton, Infacare, Napisan and Milgard: these are some of the names by
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That's especially true within the Health Service. We now need another
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You'll be working in an area approximately covering Berks, Surrey,
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In return, your salary will be supported by an incentive scheme and other
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Richardson-Merrell

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C&D BOX NO.
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This fast-moving series as stocked by Harrods and other leading stores should be in your shop now.

Write or phone for details to:

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BOX NUMBERS

When replying to Box Number
Advertisements all correspondence
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Soiled, damaged or surplus stock, any
quantity, immediate decisions and pay-
ment, will collect. B. and S. Wholesale
and Retail Supplies, Westminster House,
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(TCW)

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Drug runs, shop interiors, bottles, etc.,
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by F. P. C. Bayliff
£11.25

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£12.50

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Publications**
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3AL

CHEMIST & DRUGGIST

Classified Advertisements

Post to Classified Advertisements, Chemist & Druggist,
25 New Street Square, London EC4A 3JA
Telephone 01-353 3212

Copy date 12 noon Tuesday prior to publication date

ORDER FORM

Please insert as below our advertisement under the heading _____

Please invoice _____ insertions _____

PLEASE PRINT _____

Name _____

Address _____

Phone _____ Date _____ Signed _____

Advertisement Materials

We should like to draw the attention of advertisers to paragraph 4 of the Conditions of Acceptance of Orders, which states:

'PRINTING MATERIAL WILL BE RETAINED for a period of twelve months following publication after which they will be destroyed, unless their return has previously been requested by the advertiser or his agents'.

We regret that problems of storage compel us to implement this rule more rigidly than in the past and we wish to give notice that all materials used October 1979, will be destroyed unless we receive instruction by January 31, 1981, to return them to the advertiser or agent.

The only BEVELLED TONGUE DEPRESSOR in the world.

Applicators also available

Also **AYRES BIOPSY CERVICAL SCRAPERS**

This high quality scraper immediately available in large quantities. Special prices for bulk orders.

ASHWOOD TIMBER & PLASTICS LTD.,

Plyfa House, Leven Road, London E14 0LW Tel: 01-987 6461/7

Winlam is the unique and established remedy for pregnancy toxæmia in ewes (twin lamb disease). Peak sales of the product are January-March.

Winlam comes within the 'Pharmacy Only' category under the Medicines Act and thus supplies, are restricted to pharmaceutical channels.

Current advertising in the 'Farmers Weekly' and 'Livestock Farming' directs sales to chemists.

For terms write or 'phone

HODGES & MOSS Ltd

Harlescott Lane, Shrewsbury, Salop
Tel: Shrewsbury (0743) 60481

winlam
for twin lamb
disease



Pulmo Bailly: it even tastes like it's doing some good.

Pulmo Bailly is not like other cough remedies.

For a start, its formulation is so strong that it needs to be diluted with water.

It's a pharmacy medicine so it can only be sold through chemists and cannot be displayed within easy reach of customers.

Finally, Pulmo Bailly has a really strong taste. Children won't take to the flavour. For that matter, neither will many adults.

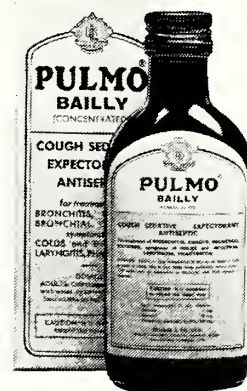
Despite all these disadvantages, thousands of people take Pulmo Bailly for their cough.

Perhaps they think that anything that tastes so bad must be doing them good.

Pulmo Bailly's medically-approved formula contains Codeine to soothe the cough reflex from the brain and Guaiacol to loosen phlegm.

So stock and recommend Pulmo Bailly.

It's the adult remedy for the adult cough.



Pulmo Bailly
The adult remedy for the heavy cough.

First-aid for fingers toes and profits.

Tubifoam*, a unique foam covered bandage for protecting fingers and toes will, from January 2nd, be available in two new retail packs exclusively from Scholl.

Which means that in true Scholl tradition the product will be backed with some really effective consumer advertising.

Tubifoam, which will now be sold in two separate sizes with each pack containing several 'cut as required' applications, is already a successful pharmacy product.

So we think it's going to be a welcome addition to your first-aid dressing section. Not just from your customers' point of view, either.

You can be sure you're backing yet another Scholl success.

So just wait for sales of Tubifoam to take off. And make a more healthy profit from first-aid.

Scholl Tubifoam is now available in individual packs of 1 1/4" and 1" widths.



*Tubifoam is a registered trade mark of Seton Products Ltd.

